

YMCA Christian Values Conference Adult Registration Form

Year: 20____

| Title First | Last | Suffix | Gender | Date of Birth | |
|---|--|--|---|--|--|
| Address: | | | | | |
| City: | | State: | Zip Code: | | |
| Home Phone #: () | | Cell #: (| J | | |
| Email address: | | | | | |
| Employer: | | Work Phone | : () | | |
| Delegation: | | | | | |
| Circle one: This is my 1st | 2nd 3rd 4th | time attending the | e Conference. | | |
| T-Shirt Size: S M L | XL 2XL 3XL *Thos | se Registered on or before June | e 12 will receive the co | nference T-Shirt | |
| I would like my information | printed in the Conference | directory. Yes No | | | |
| I am a: Y Staff Volunt | eer Y's Guy | If in College: Fresh. | Soph. Jr. Sr. | Grad Student | |
| Have you ever been conv | victed of a crime except | a minor traffic violation? | | | |
| In connection with my apmay run a Criminal | oplication to serve as a v | olunteer with the Christian | Values Conference, | understand that the YMCA | |
| Background check reque | sting information regard | ing criminal history and the | sexual offender regi | stry. | |
| I hereby authorize, without Employer, Reference or | out reservation, any Law | Enforcement Agency, Institu | ution, Information Se | ervice Bureau, School, | |
| Insurance Company to fu | urnish the information de | escribed in this form. | | | |
| Initials: Social S | Security Number: | | | | |
| Emergency Conta | act | | | | |
| Title First | Last | Suffix | Gender | Date of Birth | |
| Home Address: | | | | | |
| City: | | State: | Zip | Zip Code: | |
| Home Phone #: () | Cell #: | : () | | | |
| Email address: | | | | | |
| heirs, personal representatives, ass the YMCA, using any of its facilities, responsibility for, and risk of, any inj successors and assigns, and its dire resulting from any injury to myself o participating in any YMCA program upon the premises of the YMCA or provide or cause to provide such me care or treatment. I further understate participation in YMCA programs and limitation or obligation, photographs | signs and next-of-kin, do hereby agre, services or equipment, or participa jury to myself or loss or damage to rectors, officers, employees, and age or loss or damage to my property tha or activity. 3. I hereby indemnify and use of its facilities, services or equipedical care and treatment to me as rand that if I fail to abide by the rules and activities without a refund of dues, s, film footage, or tape recordings who | see to the following: 1. I understand that the ting in any YMCA program or activity are my property that may occur as a result the ints (collectively, the "Releasees") from a at may occur while I am in or upon the pred though a minimum or a minimum or a minimum of the program, or participation in any YMCA programy be necessary and appropriate. I under and regulations of the YMCA, I am subjectes or other amounts paid to the YMCA. | ne activities that I will be engage inherently risky and potential ereof. 2. I hereby release, wai all claims, demands, damages emises of the YMCA or using a cost, liability, damage, or cost tram or activity. In the event of lerstand that I am solely respond to to removal from the premise. I hereby give my permission he purpose of promoting or interest. | ve and covenant not to sue the YMCA, its, losses and causes of action arising or any of its facilities, services or equipment, chey may incur due to my presence in or injury, I hereby authorize the Releasees to insible for all costs incurred for such medicals of the YMCA and/or removal from to the YMCA to use indefinitely, without erpreting YMCA programs and activities. | |