

2018 - Youth Registration Form

HOPE Club	(Preschool – Gr. 1)
JOY Club	(Gr. 2 – Gr. 5)
Jr. GOYA	(Gr. 6 – Gr. 8)
GOYA	(Gr. 9 – Gr. 12)

Which youth groups do you wish to sign up for?

CHILD'S NAME #1: _____ AGE _____ HOPE , JOY , Jr. GOYA , GOYA

CHILD'S NAME #2: _____ AGE _____ HOPE , JOY , Jr. GOYA , GOYA

CHILD'S NAME #3: _____ AGE _____ HOPE , JOY , Jr. GOYA , GOYA

CHILD'S NAME #4: _____ AGE _____ HOPE , JOY , Jr. GOYA , GOYA

Registration Fee \$10/Child (Jr. GOYA & GOYA only) Paid: _____

SURNAME: _____

FATHER'S NAME: _____ CELL PHONE#: _____

MOTHER'S NAME: _____ CELL PHONE#: _____

HOME ADDRESS: _____

HOME PHONE #: _____

PRIMARY EMAIL ADDRESS: _____

FOOD ALLERGIES: _____

CONSENT FORM #1

I,(Name of person giving consent)

- Consent to the use of photographs or video footage for use on the Holy Trinity Greek Orthodox Community of London Ontario (Canada), website and Facebook page, in newsletters and publications.
- Consent to the use of photographs or video footage being used to promote future events by the London Greek Community including Hope Club of London and other media.
- I further understand that this consent may be withdrawn by me at any time, upon written notice.

.....
Signature of person giving consent

.....
Signature of parent/guardian < 18

.....
Date

CONSENT FORM #2

In consideration of Holy Trinity Greek Orthodox Community of London and Vicinity (“HT Community”)

permitting: Youth Participant: (Print Name) _____

to participate in events taking place under HTY (Holy Trinity Youth)

The (event) Participant hereby releases, agrees to indemnify and hold harmless the HT Community, its respective directors, officers, employees and/or appointed agents of and from any and all claims whatsoever arising or which may arise by reason of the (event) Participant’s participation in the (event) including claims due to personal injuries or illness excepting any such claim resulting from and/or arising out of the gross negligence of the HT Community, its respective directors, officers, employees and/or appointed agents.

Should the (event) Participant suffer injury or illness while on the (event), (event) Participant hereby accepts full responsibility for obtaining such medical attention for the (event) Participant as may be deemed appropriate by said (event) Participant in the circumstances. The (event) Participant agrees to bear the costs of all medical care and procedures required by the (event) Participant.

The (event) Participant hereby releases HT Community, its respective directors, officers, employees and/or appointed agents from any claim arising out of any medical treatment the (event) Participant may require.

The (event) Participant acknowledges that should the (event) Participant fail to keep and obey all rules and regulations prescribed by the HT Community, its respective directors, officers, employees, and/or appointed agents while participating in the (event) Trip, HT Community may, in its sole and absolute discretion, terminate the (event) Participant’s participation in the (event) without refund for the cost of the (event). Any additional costs incurred by reason of the termination of the (event) Participant’s participation in the (event) and/or as a result of the (event) Participant being sent home will be the responsibility of the (event) Participant.

We have carefully read this Registration and Waiver/Release Agreement and understand the terms and conditions of it and agree to be bound thereby and to hold harmless and indemnify the HT Community to the fullest extent of the law.

Youth Participant (Signature >18)

Parent Signature (<18)

Date