



Adult Information

Delegation: _____

Title _____ First _____ Last _____ Suffix _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Email address: _____
 Home Phone #: (_____) _____ Cell #: (_____) _____
 Work Phone: (_____) _____ Male _____ Female _____
 Gender _____ Date of Birth _____

Please Circle answers below:

I would like my information printed in the Conference directory. **Yes** **No**

This is my **1st** **2nd** **3rd** **4th** ____ time attending the Conference.

T-Shirt Size: **S** **M** **L** **XL** **2XL** **3XL** (Circle Size) **All registrations received by June 2nd will receive a t shirt**

I am a: **YMCA Staff** **Volunteer** If in College: **Fresh.** **Soph.** **Jr.** **Sr.** **Grad Student**

Has your Youth in Government program preformed a background check on you in the past 12 months? **Yes** **No**

If Yes, skip to Signature

Have you ever been convicted of a crime except a minor traffic violation? _____

In connection with my application to serve as a volunteer with the National Affairs Conference, I understand that the YMCA may run a Criminal Background check requesting information regarding criminal history and the sexual offender registry.

I hereby authorize, without reservation, any Law Enforcement Agency, Institution, Information Service Bureau, School, Employer, Reference or Insurance Company to furnish the information described in this form.

Initials: _____ Social Security Number: _____ - _____ - _____

Emergency Contact

_____ Male _____ Female
 Title _____ First _____ Last _____ Suffix _____ Gender _____

Cell #: (_____) _____ Work Phone: (_____) _____

In consideration for being permitted to utilize the facilities, services and programs of The Young Men's Christian Association of Montgomery, Inc. ("YMCA"), I, on behalf of myself and my heirs, personal representatives, assigns and next-of-kin, do hereby agree to the following:

1. I understand that the activities that I will be engaging in while I am in or upon the premises of the YMCA, using any of its facilities, services or equipment, or participating in any YMCA program or activity are inherently risky and potentially hazardous and I hereby accept full responsibility for, and risk of, any injury to myself or loss or damage to my property that may occur as a result thereof.
2. I hereby release, waive and covenant not to sue the YMCA, its successors and assigns, and its directors, officers, employees, and agents (collectively, the "Releasees") from all claims, demands, damages, losses and causes of action arising or resulting from any injury to myself or loss or damage to my property that may occur while I am in or upon the premises of the YMCA or using any of its facilities, services or equipment, or participating in any YMCA program or activity.
3. I hereby indemnify and hold harmless the Releasees from all loss, liability, damage, or cost they may incur due to my presence in or upon the premises of the YMCA or use of its facilities, services or equipment, or participation in any YMCA program or activity.
 In the event of injury, I hereby authorize the Releasees to provide or cause to provide such medical care and treatment to me as may be necessary and appropriate. I understand that I am solely responsible for all costs incurred for such medical care or treatment.

I further understand that if I fail to abide by the rules and regulations of the YMCA, I am subject to removal from the premises of the YMCA and/or removal from participation in YMCA programs and activities without a refund of dues, fees or other amounts paid to the YMCA. I hereby give my permission to the YMCA to use indefinitely, without limitation or obligation, photographs, film footage, or tape recordings which may include my image or voice for the purpose of promoting or interpreting YMCA programs and activities.

I HAVE READ AND VOLUNTARILY SIGN THIS AGREEMENT AND AGREE, INDIVIDUALLY AND ON BEHALF OF SAID CHILD OR WARD, TO BE BOUND BY ITS TERMS.

Adult Participant's Signature: _____ Date: _____