



2019-2020 YMCA Adventure Guides/ Princess Registration Form

Circle/Navigator's Name: _____ Grade: _____

Child's Name: _____ Gender : _____ Age: _____

Address: _____ City: _____ Zip : _____

Father: _____ Mother: _____

Work: _____ Work: _____

Cell Phone: _____ Cell Phone: _____

Email: _____ Email: _____

In Case of Emergency, Contact:

Name: _____ Relationship: _____

Cell Phone #: _____

The Hot Springs Family YMCA does not assume responsibility for injuries incurred while participating in any YMCA program or event and is not liable for lost or stolen items. I give permission to the YMCA to use any photography, film footage, or tape recording which may include my (my child's) image or voice for the purpose of promoting YMCA programs. I, the undersigned, for myself, my heirs and assigns, do hereby release the YMCA of Metropolitan Little Rock, employees and agents for any all claims for injury, death, loss and damage I may incur as a result of my (my child's) participation.

I give my child permission to participate in the YMCA Adventure Guides evaluation process. This process includes collection of demographic data, attendance, and youth development and family outcomes. No information about your child will be disclosed to anyone outside the research process. The research staff will maintain your child's confidentiality by not revealing his/her identifying information. I give my permission and consent to the YMCA of the USA, its agents, successors and assigns the right to use, print, publish, reproduce and license, in any manner whatsoever, my or my child's survey responses. I understand and agree that my or my child's survey response submission may be used by the YMCA or others.

Zero Tolerance Alcohol Policy

The YMCA Adventure Guides program is an alcohol and a drug free environment. The use of alcohol or illegal drugs on YMCA property or during an Adventure Guide event is strictly prohibited. The Adventure Guides program has a no tolerance policy. Anyone found drinking or using illegal drugs will be asked to leave the program for one year with out reimbursement.

This policy is consistent with the mission of the YMCA and is the policy dictated by the Hot Springs Family YMCA.

PARENTS SIGNATURE: _____ DATE: _____