



## Adult Information

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

Please Circle answers below:

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

T-Shirt Size: **S** **M** **L** **XL** **2XL** **3XL** (Circle Size)

*\*Those Registered on or before June 12 will receive the conference T-Shirt*

*\*\*All Registrants will receive a conference photo.*

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

I am a: **Y Staff** **Volunteer** **Y's Guy** If in College: **Fresh.** **Soph.** **Jr.** **Sr.** **Grad Student**

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 Christian Values 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: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Spouse Information       Emergency Contact

	Male	Female			
Title	First	Last	Suffix	Gender	Date of Birth
Cell #: (_____) _____			Email address: _____		
Employer: _____			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:** \_\_\_\_\_