



America On the Move Week with the YMCA » September 20-27, 2009

YMCA of Eastern Union County
Branches In: Elizabeth, Five Points, Rahway

Please print clearly, one form per participant...

Name:		
Address:		
City:	State:	Zip Code:
Home Phone:	Sex: M or F	Birthday: ____/____/____
How did you hear about this event?: _____		
Email address: _____		
May we email you future announcements and information? Circle: Yes or No		
Emergency Contact, Name and Phone Number:		

RELEASE AND WAIVER OF LEGAL LIABILITY:

I AGREE THAT THE YMCA SHALL NOT BE RESPONSIBLE FOR ANY PERSONAL INJURIES OR LOSSES SUSTAINED BY ME OR MY FAMILY WHILE ON ANY YMCA PREMISES, OR AS A RESULT OF ANY YMCA SPONSORED ACTIVITIES. I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS THE YMCA FROM ANY CLAIMS OR DEMANDS ARISING OUT OF ANY SUCH INJURIES OR LOSSES. (ESTOY DE ACUERDO QUE LA YMCA NO ES RESPONSABLE POR NINGUN ACCIDENTE O PERDIDA QUE ME PUEDA OCURRIR A MI O OTRO MIEMBRO DE MI FAMILIA ESTANDO EN SUS INSTALACIONES O COMO RESULTADODE CUALQUIER ACTIVIDAD QUE LA YMCA ESTE PATROCINANDO. ADEMAS ACUERDO QUE NO VOY A EXIGIR NINGUNA INDEMNIZACION A LA YMCA COMO RESULTADO DE CUALQUIER DEMANDA QUE PUEDA OCURRIR COMO RESULTADO DE ALGUNA PERDIDA O ACCIDENTE).

THE YMCA OF EASTERN UNION COUNTY HAS PERMISSION TO USE PHOTOS/VIDEOS OF ME AND/OR MY FAMILY FOR ANY YMCA PROMOTIONAL MATERIAL OR MEDIA USE. (LA YMCA DE EASTERN UNION COUNTY TIENE AUTORIZACION PARA USAR FOTOS/VIDEOS DE MI Y/O MI FAMILIA PARA CUALQUIER MATERIAL PROMOCIONAL O USO DE LOS MEDIOS DE COMUNICACION).

Signature of Applicant

Date

Under 18, Signature of Parent/Guardian required

Date