

***youth explosion 2017***  
***registration form***  
***oct. 20-22, 2017***

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Health Concerns: \_\_\_\_\_

AHC: \_\_\_\_\_

Youth/Church Group Name: \_\_\_\_\_

Email Any Questions to: [yevulcan@hotmail.com](mailto:yevulcan@hotmail.com)

**Staying over?**

I will be needing accommodations for \_\_\_\_\_ nights. Please call/email in advance to make arrangements for billeting.

**Please NOTE:**

You must have an adult sponsor along with you &/or your group if you are staying overnight. Guys require an adult male sponsor and girl require an adult female sponsor. In the event of a disciplinary problem, the parents/guardians will be contacted.

**Parents/Guardians:**

In order for the aforementioned youth to fully participate in all the planned activities at Youth Explosion, we are asking that you carefully read and sign the following waiver.

I, \_\_\_\_\_, parent/guardian of the aforementioned, do hereby consent to his/her full participation in all of the events at Youth Explosion. I realize that there are risks of bodily injury from any activity, inside or outside, including any games that will be played. In consideration of the acceptance by Youth Explosion of my youth, I hereby release Youth Explosion Committee Members involved in planning the said program, all Churches involved, Vulcan County Central High School, Vulcan Recreation Center, volunteers and/or agents for any loss or damage through personal injury or otherwise, and claims arising from any accident or sickness to my said child or ward while participating at the said program. I give Youth Explosion program the right to use pictures or video footage of the indicated child for promotional purposes.

Signature of Parent/Guardian: \_\_\_\_\_ Dated: \_\_\_\_\_