

PEACEJAM

CONNECTICUT

Adult Registration Form

PeaceJam Connecticut Slam

May 5, 2018

Breakthrough Magnet School

Hartford, Connecticut

For office use only: PLEASE do not write in this space
Conference Fee Paid: _____ Not Paid: _____ Scholarship Amount: _____

**** PLEASE TYPE OR PRINT CLEARLY****

Name: _____ Preferred Pronouns: _____

School/Organization: _____

School/Organization Address: _____

City: _____ State: _____ Zip: _____

School/Organization Phone Number _____ Cell Phone: _____

Fax Number: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Cell Phone: _____

School Email: _____

Personal Email: _____

Do you have any dietary needs?

Any allergies, physical accommodations, or other needs?

REQUIRED REGISTRATION FEE:

& Please Bring a Packed Lunch

Please Make Checks Payable to PeaceJam Foundation

\$30

Check

Cash

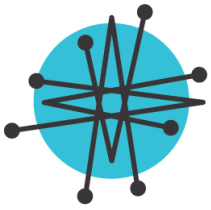
Paid by my school/organization

Other: \$_____

- Please collect all registration forms/fees from your group and send along with your registration form/fees in one packet to the address below.
- Please note that due to the various logistical aspects of conference planning, refunds will not be given for registered students who do not attend. Submitting a registration form for the conference is a commitment to the participant slot. Substitutions are accepted up to the day of the event.

SEND COMPLETED STUDENT AND ADULT FORMS AND FEES TO:

EMAIL FORMS TO: Jennifer at connecticut@peacejam.org



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ADULT ADVISOR/TEACHER RELEASE

This release is executed on the _____ day of _____
20_____, by _____ (“Teacher” or “Adult Advisor”, “Re-
leasor”) in favor of PeaceJam Foundation, PeaceJam Connecticut, PeaceJam New England, and the Breakthrough
Magnet School(collectively “Parties Released”).

In consideration of the Adult Sponsor (Releasor) being allowed to participate in PeaceJam Youth Conference or PeaceJam Slam, instructional, workshops, and outreach activities scheduled to take place on May 5, 2018 (the “Activities”) including, but not limited to, musical entertainment, games, community service activities, garden-
ing, building maintenance, etc. Releasors hereby acknowledge that they have had the opportunity to determine the nature of the Activities and the manner in which they will be conducted. Having such knowledge or having waived the right to obtain such knowledge, Releasors hereby personally assume all risks in connection with the Activities and further release the Parties Released and their instructors, agents, employees, volunteers, operators, officers, and trustees from liability for any harm, injury, or damage which may befall the Releasor while engaged in the Activities, traveling to or from the sites of the Activities, or arising from the Releasor’s presence at or near the sites of the Activities, including all risks connected therewith, whether foreseen or unforeseen, and whether arising from the negligence of the Parties Released or their instructors, agents, employees, volunteers, operators, officers, and trustees. Releasors further agree to save and hold harmless the Parties Released and the above persons from any claim by Releasors or their family, estate, heirs, or assigns, which arise out of the Activities.

Releasors acknowledge that the Activities may involve transportation by bus, private vehicle, or other mode of transportation, and may involve outreach activities beyond the scope of traditional academic functions including outreach activities into neighborhoods involving direct personal contact with community members. Releasors acknowledge that the Releasor’s participation in the Activities is voluntary, and that such participation potentially involves risks which are impossible to predict, but which may be beyond the scope of risks normally associated with the traditional academic functions. These risks may include but are not limited to loss or damage to personal property, and the risk of sickness, personal injury, death, etc., while participating in the Activities.

Releasors understand that parts of the Activities may be physically and/or emotionally demanding. Releasors affirm that the Releasor is not under a physician’s care for any condition that might endanger the Releasor’s health as a result of participation in the Activities, or endanger the health of other participants. Releasors understand that they are assuming the risk of any physical injury that might result to the Releasor as result of the Teacher’s participating in the Activities.

Releasors hereby grant to the Parties Released and all persons or entities acting for or through them the rights to use, reproduce, assign, and/or distribute photographs, films, videotapes, sound recordings, and other media presentations of any kind whatsoever, in which the Releasor may appear and which are made or produced in connection with the Activities. Releasors state that they fully understand that the terms of this Release are contractual and not a mere recital, and that they have signed this document as their own free act. Releasors state that they have fully informed themselves of the content of this Release by reading it before signing it.

Printed Name: _____

Signature: _____ Date: _____