

# REGISTRATION FORM

## PERSONAL INFORMATION

Student Name :   
 Birthdate : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender :  Male  Female  
 Home Address : \_\_\_\_\_  
 Phone Number : \_\_\_\_\_ E-Mail : \_\_\_\_\_  
 ID Number : \_\_\_\_\_ Student Grade : \_\_\_\_\_

## EMERGENCY CONTACT DETAILS

Contact Name : \_\_\_\_\_ Home Number : \_\_\_\_\_  
 Relationship : \_\_\_\_\_ Mobile Number : \_\_\_\_\_  
 Contact Name : \_\_\_\_\_ Home Number : \_\_\_\_\_  
 Relationship : \_\_\_\_\_ Mobile Number : \_\_\_\_\_

## RELEASE FORM

### Parent/Guardian Informed Consent, Acknowledgment and Release

We/I, the parent(s) and/or guardian(s) of the minor child, \_\_\_\_\_, being \_\_\_\_\_ years of age, hereby give permission for the minor child to attend JFWA Sport-stravaganza at Lincoln Memorial University. We/I recognize and understand that the child will be participating in activities which may expose the child to some level or risk of injury. We/I acknowledge that the minor child will be participating at his/her own risk.

Furthermore, in consideration of Lincoln Memorial University allowing the minor child to attend JFWA Sport-stravaganza, we/I hereby do release and hold harmless Lincoln Memorial University and its trustees, agents, officers, and employees, against loss (including reasonable attorneys' fees) from any and all claims or causes of action of any kind or nature that may be brought by or on behalf of the said minor child or by us arising out of any and all known or unknown, foreseen and unforeseen bodily or personal injuries, damages to property and consequences thereof which may be sustained by the said minor child or is arising out of or in connection with JFWA Sport-stravaganza. Furthermore, we agree to indemnify Lincoln Memorial University for any loss or damage to the premises, facility, or equipment of the LMU facilities caused by our minor child. Such indemnification shall include costs and expenses incurred by Lincoln Memorial University, including reasonable attorney fees.

This JFWA Sport-stravaganza permission form gives permission to seek whatever medical attention is deemed necessary, and releases Lincoln Memorial University, JFWA, its staff, and its volunteers of any liability against personal losses of named child. I/we the undersigned, have legal custody of the camper named above, a minor, and have given my/our consent for him/her to attend JFWA Sport-stravaganza organized by Lincoln Memorial University. We/I have read the foregoing release and understand that we/I are signing a complete release and bar to any claims as defined above.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### More Information :

 (423) 869-6234 (JFWA Main Office)

 [Click here](#)

Please click email address to submit your completed registration form: [JFWA.Admissions@LMU.net.edu](mailto:JFWA.Admissions@LMU.net.edu)

**THANK YOU**