STUDENT REGISTRATION FORM

Student Name:									
F	First	Middle I	nitial		I	Last			
Date of Birth:		_Grade:		Gender:	F	Μ	Shirt Size:		
Tribal Affiliation:						Men	nber/ Descendent (circ	le one)	
Family Clan:			_ (will be us	sed in one	e of	the a	activities this week)		
Parent/Guardian Name 8	Relationship:								
Address:									
City:		State	:			_Zip:			
Email:								_	
Phone Number: (day) ()	_(evening)(_)	(ce	ell)(_))Okay t	o text? (Y	N)
Parent/Guardian Name 8	& Relationship:								
Address:									
City:		State	:			_Zip:	·		
Email:								_	
Phone Number: (day) ()	_(evening)(_)	(ce	ell)(_))Okay t	to text? (Y	N)
Emergency Contact Infor	rmation in the ev	ent a parent/g	uardian car	not be re	each	ned			
Contact Name:		Re	elationship:				Phone number:()	
Contact Name:		Re	elationship:				Phone number:()	
The following person perso understand this form gives					-	-		in my absen	ce. I
Name:		Relationship:					Phone number:		
Medical Information Youth has health insuran	ce: (Y N)Health	icare Provider N	Name & Pho	one numb	er:_				_
Company Name & Policy	Number:								
Please describe any healt	th (behavioral or	physical) relate	d issues (all	ergies/ m	edi	catio	ns) *Snacks provided d	luring progr	am.

STUDENT PROGRAM AGREEMENT

- To do my best to represent the group and the tribe in a positive manner at all times
- To help in any way I can if asked
- To use my words not my hands, or other body parts, or objects to resolve problems

Youth Signature

Date

CAREGIVER AGREEMENT FORM

I give my child permission to participate in the Spring Break Cultural Day Camp March 26-28, 2019.

I understand *that I am responsible for dropping off and picking up my child.*

Drop Off will be at the Tribal Gym at 1pm Pick up will be at the Tribal Gym at 5pm

Child's Name:		
Age:	Grade (2018-2019 academic year):	
Caregiver Name:		Date:
Caregiver Signature:		
Caregiver Phone Number	r & Best way to be reached:	

	PHOTOGRAPH/ VIDEO REI	<u>_EASE FORM</u>		
l,	, parent/guardian of		grant	
(Print Name)		(Child's Name)		
photography, electronic imagi entire body and/or other view matters, including promotional SCIT may publish, use, reprodu future, including printed or de publications (newspapers, tele compensation, at any time, for	Tribe (SCIT) full and unrestricted authority ng, drawing, sketching or other imaging teo s ("Image"). I further grant SCIT the ability il, informative, instructional and/or teachin uce or otherwise disseminate the Images to veloped pictures, digital images, Internet p evision news, presentations, newsletters an r the taking or use of the Images and I waiv above grants, releases and waivers, SCIT sh long as SCIT retains the same.	chniques, which may consist of an image to freely use such Image for any and al g purposes. To any third parties, via any medium ava publication, presentations, local and/or rd/or flyers) and any other medium. I s we and release any and all rights or clair	ge of my full-face, Il purposes related to ailable now or in the r national hall not receive any ms I may have to	
Authorized Signature		Date		
I,(Please print first and last name)		to an activity/service bein		
	e staff. This consent is effective from <u>March 2</u> xpire automatically as follows: <u>March 28, 20</u>		ked by me in writing.	

Date: _____

C:	
Signature:	