## ETNBA 2019 Jam Camp Registration

Student Name		
Name of Parent or Legal Guardian (if	student is under 18)	
Address		
Street		
City	State	Zip
Phone		
Email		
Emergency Contact (other than parer	nt)	
Phone		
Please list any and all physical/mental problems, restrictions, conditions, including all allergies below:		
Will you be eating the camp lunch? _		

## **Release of Liability**

I, or as the legal parent or guardian, of, release and hold harmless the East Tennessee Bluegrass Association, its leadership and members, from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, property damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of the East Tennessee Bluegrass Association or in route to or from any said premises.
Medical Emergency
The undersigned gives permission to the East Tennessee Bluegrass Association, its leadership and members, to seek medical treatment for the participant in the event that they are not able to reach a parent or guardian. I herby declare, I have disclosed all physical/mental problems, restrictions, or conditions and declare the participant to be in suitable physical and mental health to participate in East Tennessee Bluegrass Association activities.
Photo Release
I hereby give my permission for the East Tennessee Bluegrass Association, its leadership and members, to use photos of myself or my child on their website, Facebook Page, brochures, or other advertising.
Name of Participant
Signature of Participant or Parent/Legal Guardian (if under the age of 18)
Date