



WeEmbrace

Where acceptance emphasizes possibilities  
Contact : 5103866842

Registration Form to attend WeEMBRACE Activities and Events. Completed signed form to be sent to weembracefamilies@gmail.com.

Full Name of the child/adult child: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Parent(s)/Guardian Name (s): \_\_\_\_\_

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

Phone: (Mobile): \_\_\_\_\_

Email: \_\_\_\_\_

Subscribe to Mailing list:  Yes  No

Please check any or all interested WeEMBRACE programs that your child would like to participate. For more Information on our programs, please visit our website [www.weembracefamilies.org](http://www.weembracefamilies.org)

Dance  Buddy Match Program (1:1)  Arts and Crafts  Social club  Yoga  Siblings Meetup  
 Zumba  Workshops  Social Events  Picnics  Talent/Fashion Show  Drama club  
 Fun science activities  Music  Keyboard classes

#### Emergency Treatment and Liability Release

- By signing this registration form, you acknowledge that you understand that WeEMBRACE – Board Members, Instructors and other professionals involved in a WeEMBRACE program/activity do not provide any accident or health coverage of its students and volunteers. In case of emergency , during our in person activities, if you or your child were to become injured while attending or participating in a WeEMBRACE program/activity or event, we will call 911 and call the person listed for emergency contact and you agree to give permission for us to provide your child or adult child information to 911 to a licensed physician, surgeon, clinic or hospital to secure proper treatment for the registered individual and assume the responsibility for all the medical expenses, if incurred.
- You understand that WeEMBRACE does not provide any legal, therapy or medical advice. We are individuals who have the passion to create a unique program that will benefit our students through the activities. Each WeEMBRACE activity is designed by a professional or designed in consultation with a professional. They will continue to remain as consultants for the program. All volunteers and other staff are trained accordingly. The specialists DO NOT provide any direct services. WeEMBRACE has the right to refuse services to any one at their discretion.
- You agree to issue release, forever discharge and agree to hold harmless WeEMBRACE – Board members, Instructors and other professionals involved in a program/activity, thereof from any and or all liability, claims or demands for personal injury, sickness or death, as well as property damages and expenses of any nature whatsoever which may be incurred when you/your child is participating in the class.

Parent /Guardian Signature:

Date:

#### Read and Sign Below:

I give my permission to WeEMBRACE – Board Members, Instructors and professionals involved or a representative to film, photograph or tape me and/or my child during any WeEMBRACE program/activity or events promoting WeEMBRACE.

Parent/ Guardian Signature:

Date:

Disclaimer – WeEMBRACE is a 501c(3) registered non-profit, family support volunteer driven organization. Our EIN for tax exemptin is 82-4279137, We are not legal services or medical agency and cannot provide medical advice or legal advice or legal representation. Any information provided by WeEMBRACE BOARD members or volunteers in any form is not intended as legal or medical advice.