



DTP 2018 Registration Form

**Registration Information:**

First Name: _____ Last Name: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Address: _____

Gender: Male / Female Date of Birth (DD/MM/YY) _____ Age: _____

Church: _____

How did you hear about DTP: _____

Dietary Restrictions: (Please note that we are able to accommodate some dietary options, if you have questions or concerns please contact the event organizers (info@disturbingthepeace.ca))

Gluten Free Dairy Free Other Please specify: _____**Emergency Contact Info:**

Name: _____ Contact Number: _____

Relationship: _____

Waiver:

I,we hereby acknowledge that Disturbing the Peace (DTP), its crew members and all its participating churches are NOT to be held responsible for personal injury or any other adverse circumstance or situations suffered by the participant as a result of being part of the activities of DTP 2017 (October 13-15 2017)

I, we grant DTP the right to take photographs of the participant at DTP 2017.

I am aware that these photos may be used in several different medias including but not limited to social media and print media. I understand that these images may be used on the internet and transfer over full copyright usage to Disturbing the Peace

I agree that DTP may use these images for any lawful purpose including marketing and advertising.

Parent Signature: _____ Date: _____

Youth Signature: _____ Date: _____