

# HOPE CARE AND BEYOND

## IFC Registration Form

HOST FACILITY



Please fill out the form completely

SEX	FIRST NAME	LAST NAME	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
DATE OF BIRTH (DD/MM/YYYY)	COUNTRY OF ORIGIN	MOBILE PHONE	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
ADDRESS		EMAIL	
<input type="text"/>		<input type="text"/>	
EDUCATIONAL BACKGROUND		EMERGENCY CONTACT NAME & RELATION	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PRIMARY	MIDDLE	HIGH	SOME COLLEGE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COLLEGE GRAD	OTHER/ VOCATIONAL TRAINING	EMERGENCY CONTACT NUMBER	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	
MARITAL STATUS		EMPLOYED	SEEKING EMPLOYMENT
MARRIED	SINGLE	DIVORCED	WIDOWED
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	YES	NO
#OF CHILDREN IN HOUSEHOLD UNDER AGED 18		PART TIME / FULL TIME + WAGE AMOUNT	
B	G	<input type="text"/>	
<input type="text"/>	<input type="text"/>	EMPLOYER NAME	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

### PROGRAM INTEREST(S)

LIT.	PRE-BEG.	BEG.	INTERMED.	SEWING	CULTURAL DIVERSITY/ CITIZENSHIP	SPECIAL EVENTS	COOKING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### MEDIA RELEASE AND LIABILITY WAIVER

IN CONSIDERATION FOR ATTENDING THE INTERNATIONAL FRIENDSHIP CENTER CLASSES HOSTED BY AND SPONSORED BY INTERNATIONAL FRIENDSHIP CENTERS, AND FURTHER CONSIDERATION OF THIS CHURCH ALLOWING ME TO ENTER AND USE THE FACILITIES PROVIDED, I, THE UNDERSIGNED, FULLY AND COMPLETELY RELEASE, DISCHARGE, AND HOLD HARMLESS THE CHURCH, IFCS, THE TEACHERS, AND VOLUNTEERS FROM ANY AND ALL CLAIMS, ACTIONS, CAUSES OF ACTION, AND DAMAGES OF ANY KIND WHATSOEVER, INCLUDING BUT NOT LIMITED TO CLAIMS FOR PERSONAL INJURY, PROPERTY DAMAGE ARISING OUT OF MY PARTICIPATION IN ANY ACTIVITIES CONNECTED WITH THE INTERNATIONAL CLASSES AND EVENTS.

IN ADDITION, I UNDERSTAND THAT WHILE PARTICIPATING IN THE INTERNATIONAL FRIENDSHIP CENTER CLASSES, EVENTS, AND RELATED ACTIVITIES, I MAY BE PHOTOGRAPHED. I UNDERSTAND AND AGREE THAT THE PHOTOGRAPH(S) MAY BE USED IN PART OR WHOLE, AT ANY TIME, IN ANY PUBLICATIONS, PRINTED OR ONLINE FOR THE PURPOSE OF INFORMATION.

NAME / DATE

SIGNATURE