



# Frenchtown Youth Summit

Frenchtown High School, Frenchtown, MT

August 3-5, 2022

## Registration Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Primary Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Information (For youth attendees 18 and younger)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_

Please check one:

- ☐ Youth Attendee
- ☐ Youth Advisor
- ☐ Adult General Attendee

Advisor Name: \_\_\_\_\_

Advisor/Adult E-mail: \_\_\_\_\_

If you are a general adult attendee, please provide your email in the space above. If you are a student from Frenchtown School District, you do not need an advisor.

Dietary Restrictions: \_\_\_\_\_

Physical Disability Requirements: \_\_\_\_\_

\_\_\_\_\_

**Physical Activity Restrictions:** \_\_\_\_\_

**Additional information you'd like us to know:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Even with the best planning and precaution, unforeseen events and circumstances can occur. I understand that the Frenchtown Youth Summit, Frenchtown Community Coalition, and Frenchtown School District #40's staff and volunteers will do everything possible to prevent any accidents over which they have control. However, I fully understand that participation in the Frenchtown Youth Summit involves inherent risk to students and attendees regardless of all feasible safety measures that may be taken by the Frenchtown Community Coalition. By signing this form, the undersigned agrees to assume and accept all risks and hazards inherent in the activities. I, or the parent/guardian of the undersigned, also agree not to hold the Frenchtown Youth Summit, Frenchtown Community Coalition, or Frenchtown School District #40's employees or volunteers liable for damages, losses, or injuries to the person or property undersigned.

Furthermore, by signing and submitting this form, I give permission to the Frenchtown Community Coalition to use photographs, videotapes, film and audio in which you or your youth appear as a participant for educational and publicity/promotional purposes, or related to the Frenchtown Community Coalition's work.

**Attendee Signature:** \_\_\_\_\_

**Guardian Signature** (for attendees 18 and younger): \_\_\_\_\_

**Date:** \_\_\_\_\_

Please submit completed registration forms to: [ReaganMecham@ftbroncs.org](mailto:ReaganMecham@ftbroncs.org)

**Thank you! We look forward to seeing you in August!**