



March 14, 2020 - October 10, 2020
Open to kids ages 10-15.
Annual Fee: \$150 (prorated throughout the year)

STEM PROGRAM

REGISTRATION FORM

Date: _____

Child's Name: _____

Age: _____

Parent's Name: _____

Daytime Phone: _____

Cell Phone: _____

Emergency Contact: _____

Address: _____ City: _____ ST: _____ Zip: _____

Email Address: _____

Legal Information

In consideration of being allowed to participate in a DOCPAC educational program, the undersigned, on his or her own behalf, and/or on behalf of the participant(s) identified, below, acknowledges, and agrees to the following conditions:

I, _____ the parent/legal guardian of _____ the participant(s), do recognize that as a part of the participant(s)' attendance, he or she will be in contact with and may be allowed to hold and/or pet animals. I understand there is a chance that the participant(s)' may contact a disease or illness in handling the animals. I also understand that there is a chance that the participant(s) may sustain a scratch or bite while handling the animals. I understand that the above is illustrative of the types of risks involved in participating, but is not a complete list of possible risks. I, on behalf of myself and the participant(s), knowingly and freely **assume all such risks, both known and unknown, even if arising from the negligence of others;** and by signing my name below, I, for myself and the participant(s) do hereby, absolutely and unconditionally **release and discharge the Dorothy O'Connor Pet Adoption Center** including its employees, successors, assigns, directors, officers and agents from and against any and all claims, obligations and liabilities, of every nature and kind whatsoever, relating to or arising out of participant(s)' participation with the Dorothy O'Connor Pet Adoption Center's education programs. In case of injury to my child, I request the Dorothy O'Connor Pet Adoption Center to contact me. In the event that the Dorothy O'Connor Pet Adoption Center is unable to reach me or the emergency contact, I authorize the Dorothy O'Connor Pet Adoption to make whatever arrangements deemed necessary.

I certify that I am the above child's legal guardian:

YES NO

I authorize the Dorothy O'Connor Pet Adoption Center to use my child's name, photograph and video image for public relations in their newsletter, on Facebook and/or on the website www.docpac.net:

YES NO

Parent/Guardian's Signature

Date