

DaCi USA Intergenerational gathering wishes to be responsible about hosting children without parents. We assume that each director bringing a group has information on each of their students. We assume that every registrant is able to fully participate. Directors bring a group may wish to have more contact or medical info on each of their participants, adults and children alike, including powers of attorney and medical history.

**Release Forms- DUE AT CHECK IN from each Person attending the conference in any role: Youth, University, Adult, Chaperone, Teacher**  
**Minors must have these forms signed by parent or guardian or they may not participate.**

Participant's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_  
Email \_\_\_\_\_

## Liability Release

I, \_\_\_\_\_ (first and last name), am a voluntary participant in the activities of the Dance and the Child International Conference 'Creating Landscapes' for the period of August 12, 2008—August 16, 2008.

I hereby acknowledge that there is an unavoidable risk of injury associated with the practice of dance. I agree that Brigham Young University bears no responsibility if I sustain any injury during the course of my activity in any Brigham Young University building or outdoor environment in which dance activity occurs, so long as such injury is not directly attributable to the negligence of the University.

I hereby discharge and release Temple University and its trustees, directors, officers, employees, and agents from any and all liability for injury, loss, damage, obligation, expense, or penalty which I sustain in connection with dance rehearsal or any other conference activity at Brigham Young University.

I have read the daCi USA Intergenerational Gathering Program Information and agree for myself to, and/or hereby give my permission to have my child, participate in the activities outlined therein. I understand that participation in this program is at the discretion of the Board of Directors of daCi USA and Brigham Young University and can be terminated by them without completion. I hereby discharge and release daCi USA Intergenerational Gathering, daCi USA, and/or the Gathering faculty, their trustees, directors, officers, employees, and agents from any and all liability for injury, loss, damage, obligation, expense, or penalty which I sustain in connection with dance rehearsal or any other activity incurred during, before, or after workshops, rehearsals, or performances.

## Photo/Media Release

**The Gathering will be documented using a variety of media.** I hereby grant permission to daCi USA and its authorized agents to film, photograph or otherwise record me or my child's **participation** during the daCi Intergenerational Gathering in Provo, UT August 12-16. I understand and agree that daCi USA or its authorized agents may use any film, photos, or other records, which may contain my or my child's image or voice for publicity, educational, or research purposes. All film, photographs, or recordings shall be the sole property of daCi USA.

## Medical Release

I hereby certify that I am, or my child is, in good health and may participate in physical activity. I have listed any health considerations below for information purposes only. I hereby give permission for emergency medical treatment. I understand that the DaCi USA Intergenerational Gathering does not hold insurance and hereby certify that my child(ren) are covered by medical and accident insurance.

Signature (Parent of Minor or Participant) \_\_\_\_\_

Print Name \_\_\_\_\_

# Emergency Contact (every person must have emergency contacts, adults & children)

Name	Telephone #

## Health Problems/Allergies

Please consider the following medical conditions when listing health issues: Heart Condition or disease, Asthma, Diabetes, Seizure Disorder, Allergy to Medications, Allergy to Insect Stings, **FOOD ALLERGIES**. If children have these or other serious health considerations, please attach a note, explaining the situation, listing any current medications, and detailing any special restrictions or limitations, or treatment that should be followed during the course of the day. We will only use this information in case of a medical emergency, not for programming considerations. All participants are responsible for their own level of participation; the Gathering can not administer medication, monitor eating habits, or prohibit participants from activities. Minors traveling with groups should have more medical information on file with them.

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