



**KTUNAXA
NATION**

“AHEAD OF THE GAME 2.0”

**KTUNAXA NATION COUNCIL YOUTH SUMMIT
EDUCATION & EMPLOYMENT SECTOR**

**March 19-21, 2019
Location: DAN JOE MEMORIAL GYM
7470 Mission Rd, Cranbrook BC**

REGISTRATION FORM

Participant Information request for meals and accommodations. Please ensure your registration form is completed in full and returned to Ktunaxa Nation Council by **March 5, 2019**

Drop off: 220 Cranbrook St N, Cranbrook, mail: 7825 Mission Rd, Cranbrook, BC V1C 7E5
Fax (250) 489-2438 or @ Ktunaxa Band Offices - Attn: Bertha Andrews (bandrews@ktunaxa.org)

PRINT NAME:		AGE:	PRINT EMAIL:	
ADDRESS:	P. CODE	PHONE:	FIRST NATIONS BAND	

Do you need accommodations for the Youth Summit? Yes No	Mon Mar 18 *	Tue Mar 19	Wed Mar 20
If yes, which dates do you require accommodations?	*travellers only		
Will you be driving to the Youth Summit? If so, from where.			
Please provide vehicle driver's name and plate number.			

MEALS:	March 19 lunch & supper	March 20 Lunch & Supper	March 21 -Lunch
Will you be in attendance for the entire event? YES NO			
If no, What days will you require meals?			
Do you have any food allergies? If so, please list foods.			

EMERGENCY CONTACT INFORMATION:		
Name:	Phone:	Cell:
Address:	City & P.C.	
Physician:	Clinic Phone:	
Health Care #:	Band Affiliation:	

PARTICIPANT &/or PARENTAL CONSENT - RELEASE AND WAIVER:
As the parent or legal guardian of the above child, who is a minor child under the age of eighteen (18) (hereinafter "my Child"), and in exchange for the benefits to be derived by my Child's participation in this Youth Summit sponsored by Ktunaxa Nation Council, Education & Employment, I hereby grant my permission for my Child to participate and I am fully aware of any risks associated with Youth Summit.
On behalf of myself or if participant is under 18, parental consent for my Child, VOLUNTARILY ASSUME ALL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY that may be sustained by myself or the minor child, or any loss or damage to property owned by myself or my Child, as a result of being engaged in the Youth Summit.
Participant or Parent (Guardian) signature: _____ Date: _____

Note: Participant Media Release Forms are to be included with the Registration Form.