



e-Rotaract
of Rotary District 7490

AUTUMN
ADVENTURE
WEEKEND

REGISTRATION AND PARTICIPATION FORM

OCTOBER 24-26, 2008

BRYN MAWR MOUNTAIN RETREAT AND CONFERENCE CENTER – Honesdale, P.A.

<p><i>Please print legibly or type: Complete all items. If under 18, Parent or Guardian <u>must</u> sign.</i></p>		
Participant Name(s):		Group (if you are coming with one):
Address:	Sex:	E-mail:
City/State:		Zip:
Preferred Phone Number:		
<p>AUTHORIZATION: I do voluntarily consent to participate in all activities of the e-Rotaract 7490 Autumn Adventure Weekend to be held at the Bryn Mawr Mountain Retreat and Conference Center, Honesdale, PA, on October 24-26, 2008. I assume responsibility for any medical or treatment fees or costs incurred directly or indirectly as a result of this participation. I also authorize the representative(s) of Rotary International to arrange for professional care and treatment in case of medical emergency.</p> <p style="text-align: center;"><i>A photocopy of this form is as valid as the original.</i></p> <p>The above stated has the opportunity to participate in an educational experience at Bryn Mawr Mountain Retreat and Conference Center, Honesdale, PA, on October 24-26, 2008. Part of this experience will include Adventure Challenges. This may include, but is not limited to: high rope activities, environmental educational activities, initiative activities and games. We are informing you that there are inherent risks in these activities; however the Bryn Mawr Staff will make every effort to minimize risk through proper instruction, guidance, and supervision of these activities. You will receive specific instruction on safety procedures. However, Bryn Mawr Mountain Retreat and Conference Center and its employees cannot be held responsible for injury from negligent actions of you, other participants, or from unforeseeable circumstances. If this participation form is being submitted on the behalf of a minor, by signing below a parent or guardian gives permission for the minor to participate without restrictions in the Adventure Challenge Program at the Bryn Mawr Mountain Retreat and Conference Center.</p>		
<p>Print Parent or Guardian Name _____ Signature _____ Date _____</p>		