

## REGISTRATION FORM

If I am accepted as a student to the session indicated below, I fully understand and agree that while I am a student, all my personal needs or requirements are entirely my own responsibility, including accommodation, care and protection of my belongings and equipment, personal visitors, meals, transportation, tools, personal safety, personal insurance coverage, etc.

I accept as my personal risk the hazards of such participation and will not hold the property owners, permit holders, or their representatives responsible or liable for any injuries, mishaps, loss of or damage to personal property, or any other eventualities on, or relative to, a program workshop. In consideration of the acceptance of my application, I hereby release and forever discharge the event provider, its officers, directors, employees, volunteers, and agents from any liability whatsoever arising as a result of my participation in this workshop and I declare that this release is binding upon me, my heirs, executors, administrators, and assigns.

I understand that the fee is non-refundable. If I am unable to meet the Registration Deadlines, or if I fail to show up for the Workshop applied for, I have only one option, namely, to take another scheduled workshop, providing I notify the provider in writing prior to the original Deadline date.

I further understand, accept, and agree that no dogs, no cats, no pets, no guns, no unauthorized visitors, no booze, and no drugs shall be permitted at any time, for safety and environmental reasons.

When accepted, I will receive confirmation and other details regarding the session recommendations.

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I, \_\_\_\_\_, do hereby apply to attend Session # \_\_\_\_\_

beginning on the \_\_\_\_\_ day of \_\_\_\_\_ and ending on the \_\_\_\_\_ day of \_\_\_\_\_, **20**\_\_\_\_\_.

I enclose the session tuition of \$\_\_\_\_\_.

If, for any reason, my application cannot be accepted, I expect my payment to be returned to me promptly, with an explanation.

My age is: \_\_\_\_\_

SIGNED,

This \_\_\_\_\_ day of \_\_\_\_\_, **20**\_\_\_\_\_

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Printed name of the applicant