



*renewing earth and spirit since 1989*

**Registration Form  
"Great American Backyard Campout" June 26-27, 2010**

**Participant Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Best Phone Number to Reach You \_\_\_\_\_  
# of Tents \_\_\_\_\_ # in Party: Adults \_\_\_\_\_ Children \_\_\_\_\_

**How did you hear about our program?**

\_\_\_ *Crown Point/CSA Member*    \_\_\_ *Crown Point Email*    \_\_\_ *Flyer- Location?* \_\_\_\_\_  
\_\_\_ *Word of Mouth*    \_\_\_ *Website*    \_\_\_ *InterConnections* \_\_\_\_\_  
\_\_\_ *Magazine/Newspaper- Name?* \_\_\_\_\_

**Consent/Waiver**

**Please read and sign below:**

I, the undersigned, my heirs and assigns, hereby waive any and all claims damages or injuries we may have against Crown Point Ecology Center and the Dominican Sisters of Peace, Akron, Ohio, or any agent, employee, volunteer or representative of either for any and all injuries or damages suffered by said minor while traveling to or from, while on the premises of, or while participating in any activities of Crown Point Ecology Center and further agree to indemnify and hold harmless those parties from any claims whatsoever.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Media Consent**

I do hereby give permission to use photographs and statements made by my myself or my child for Crown Point publicity and program promotions unless otherwise noted.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

*To register please return form and payment \$25.00 per tent (Member)/ \$30.00 per tent (non-member) to:* **Crown Point Ecology Center**

**Attn: GABC  
P.O. Box 484  
Bath, OH 44210**

Confirmation of your registration and payment will be sent once this form has been processed.