



ALABAMA YMCA YOUTH IN GOVERNMENT ADULT REGISTRATION FORM

First Last Male Female
Gender Date of Birth

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: (____) _____ Cell #: (____) _____

Email address: _____

Employer: _____ Work Phone #: (____) _____

Working with the _____ Delegation.

Role: Parent School Teacher/Official Attorney Coach College Staff Other: _____

Have you ever been convicted of a crime except a minor traffic violation? YES NO

Have you authorized the YMCA to conduct a background check within the past 12 months? YES NO

In connection with my application to serve as a volunteer with the Montgomery YMCA, I understand that the YMCA may run a Criminal Background check requesting information regarding criminal history and the sexual offender registry.

I hereby authorize, without reservation, any Law Enforcement Agency, Institution, Information Service Bureau, School, Employer, Reference or Insurance Company to furnish the information described in this form.

AN EMAIL WILL BE SENT WITH INSTRUCTIONS ON COMPLETING THE CRIMINAL BACKGROUND CHECK.

Spouse Information

Emergency Contact

First Last Male Female
Gender Date of Birth

Cell #: (____) _____ Email address: _____

Employer: _____ Work Phone #: (____) _____

In consideration for being permitted to utilize the facilities, services and programs of The Young Men's Christian Association of Montgomery, Inc. ("YMCA"), I do hereby agree to the following:

1. I understand that the activities that I will be engaging in while in or upon the premises of the YMCA, using any of its facilities, services or equipment, or participating in any YMCA program or activity are inherently risky and potentially hazardous and I hereby accept full responsibility for, and risk of, any injury to myself or loss or damage to my property that may occur as a result thereof.
2. I hereby release, waive and covenant not to sue the YMCA, its successors and assigns, and its directors, officers, employees, and agents (collectively, the "Releasees") from all claims, demands, damages, losses and causes of action arising or resulting from any injury to myself or loss or damage to my property that may occur while I am in or upon the premises of the YMCA or using any of its facilities, services or equipment, or participating in any YMCA program or activity.
3. I hereby indemnify and hold harmless the Releasees from all loss, liability, damage, or cost they may incur due to my presence in or upon the premises of the YMCA or use of its facilities, services or equipment, or participation in any YMCA program or activity. In the event of injury, I hereby authorize the Releasees to provide or cause to provide such medical care and treatment to me as may be necessary and appropriate. I understand that I am solely responsible for all costs incurred for such medical care or treatment. I further understand that if I fail to abide by the rules and regulations of the YMCA, I am subject to removal from the premises of the YMCA and/or removal from participation in YMCA programs and activities without a refund of dues, fees or other amounts paid to the YMCA. I hereby give my permission to the YMCA to use indefinitely, without limitation or obligation, photographs, film footage, or tape recordings which may include my image or voice for the purpose of promoting or interpreting YMCA programs and activities.

I HAVE READ AND VOLUNTARILY SIGN THIS AGREEMENT AND AGREE TO BE BOUND BY ITS TERMS.

⊗ Signature: _____ Date: _____