



2011 – 2012 Buehler Federation Registration
Buehler YMCA - 1400 W. Northwest Hwy. - Palatine, IL - (847) 359-2400



PLEASE PRINT: Nation: (Required) _____ Tribe: (Required) _____

Parent's Name: (Last) _____ (First) _____

Address: _____ Town: _____ Zip Code: _____

Telephone Number: (Home) () _____ Work: () _____

Child's Name: (Last) _____ (First) _____

Date of Birth: _____ School: _____

Child's Name: (Last) _____ (First) _____

Date of Birth: _____ School: _____

Child's Name: (Last) _____ (First) _____

Date of Birth: _____ School: _____

Do you have any other children in any other Y-Guide program? Y N

If yes, what Nation and Tribe?

What is your E-mail address?

FOR PAYMENT USING MY CREDIT OR DEBIT CARD:

Charge my Credit/Debit Card:

Visa Discover MasterCard

Account Number: _____

Security Code (last three digits located on back of credit card):

____ _

Expiration Date: _____

Name as it appears on credit card: *(Please print)*

Signature: _____

Y ADVENTURE GUIDE PROGRAM PARTICIPANT FEES: Checks are accepted. NO CASH!!! Make checks payable to Buehler YMCA.

YMCA Member: Membership No. 051 - - - - -

Y member new to program (parent and child)	\$35.00	Non-member new to program (parent and child)	\$70.00
Y member returning to program (parent and child)	\$20.00	Non-member returning to program (parent and child)	\$60.00
Y member additional child new to program	\$12.00	Non-member additional child new to program	\$22.00
Y member additional child returning to program	\$9.00	Non-member additional child returning to program	\$16.00

THE BUEHLER YMCA ADVENTURE GUIDE PROGRAM LIABILITY WAIVER

In consideration of my participation in the activities of the Buehler YMCA's Guide Program, I do hereby agree to hold free from any and all liability the Buehler YMCA and the Metropolitan YMCA of Chicago and its respective officers, employees, and members. Furthermore, I do hereby for myself, my heirs, executors and administrators, waive, release, and forever discharge any and all rights and claims for damages I may have or which hereafter accrue to me arising out of, or connected with my participation in the Buehler YMCA Guide Program. **I understand that the Buehler YMCA does not provide accident or medical coverage.** I understand that pictures may be taken for promotional purpose during events and may be published. I do hereby declare myself and my child to be physically sound, having medical approval to take part in the Buehler Guide Program activities. I understand that I will not partake in the use of alcohol or drugs while participating in any Buehler Guide Program activities. **I understand that any violation of this policy can result in removal from the program with no refund.** I have read the foregoing statements and by my signature, my child and I will abide by the above.

Signature: _____

Date: _____