



DISCOVER your why

39th Annual Junior Civitan International Convention

PARTICIPANT REGISTRATION

June 20th-23rd, 2019 • Hyatt Regency Dulles • Herndon, Virginia (Greater Washington D.C. Area)

SECTION A: Participant Information

Participant's Full Name: _____

Preferred First Name: _____ Date of Birth: _____ Male _____ Female _____

Are you a 2019 graduate? Yes _____ No _____ T-Shirt Size (adult sizes): S _____ M _____ L _____ XL _____ 2XL _____

Home Address: _____

City/State/Province/Postal Code: _____

Phone: (_____) _____ — _____ Email: _____

Name of Junior Civitan Club: _____

Name of Junior Civitan District: _____

Will you hold a club office in 2019-20? Yes _____ No _____ If yes, what club office: _____

Will you hold a district office in 2019-20? Yes _____ No _____ If yes, what district office: _____

Do you need a handicap accessible room? Yes _____ No _____

Insurance Company: _____ Policy No.: _____

Known allergies that we should be aware of: _____

Would you prefer vegetarian meals? Yes _____ No _____ **Only those selecting yes will be guaranteed vegetarian meals.*

EMERGENCY CONTACT: _____ Relationship: _____

Phone: (_____) _____ — _____ Email: _____

*Will you be participating in 2019 Dance-a-thon? Yes _____ No _____ ** If yes, please register as an individual by visiting www.civitanandance.com. The Dance-a-thon registration fee is \$50.00 and participants have up until the start of the event to post or raise that fee on their personal fundraising page. For more information contact Amy Roberts (ext. 103, amy@civitan.org).*

SECTION C: Roommate Requests

NO MORE THAN 3 MAY BE REQUESTED.

1) _____ 2) _____ 3) _____

If my roommate requests do not match my selected package, Civitan International and/or my District Chairperson may assign other participants to my room. Yes _____ No _____ **If you select NO, you will be charged the amount for the room size that your Roommate Requests reflect.*

SECTION D: Participation Agreement

I acknowledge that attendance at the Civitan International Junior Civitan Convention (the "Convention") and participation in the various activities associated with the Convention (the "Convention Activities") involve certain inherent risks to the participant and may result in illness, bodily injury, damage to participant's property or other harm to the participant. I further acknowledge that Civitan International cannot ensure or guarantee the safety and avoidance of injury for participants in the Convention Activities. In consideration for allowing the participant to register for and attend the Convention, and to participate in the Convention Activities, the participant (or the participant's parent or legal guardian if the participant is a minor) acknowledges and accepts the risks of illness, bodily injury, property damage and/or other harm to the participant which may result from the participant's attendance at the Convention and participation in the Convention Activities, including transportation to and from Convention Activities. The participant (or the participant's parent or legal guardian if the participant is a minor) accepts personal financial responsibility for any injury or other loss suffered by the participant during attendance at the Convention or participation in any of the Convention Activities, as well as for any medical treatment rendered to the participant that is authorized by the Civitan International staff or its volunteers or representatives. The participant (or the participant's parent or legal guardian if the participant is a minor) acknowledges that the participant should have health and accident insurance to pay the costs and expenses that are incurred if the participant is injured or suffers any loss as a result of attending the Convention or participating in the Convention Activities.

SECTION E: Medical Authorization; Indemnity for Medical Expenses

I understand, acknowledge and agree that Civitan International staff, volunteers or representatives may need to respond to accidents and potential emergency situations in which the participant is involved during the participant's attendance at the Convention and participation in the Convention Activities. The participant (or the participant's parent or legal guardian if the participant is a minor) consents to any medical treatment that may be required, as determined by a medical professional at the medical facility that that is caring for a medical condition experienced by the participant. The participant (or the participant's parent or legal guardian if the participant is a minor) agrees to indemnify and hold harmless Civitan International from and against any costs, expenses and charges arising from medical treatment provided to the participant on account of any injury suffered by the participant while attending the Convention or participating in the Convention Activities.

SECTION F: Photos/Video Release

In consideration for allowing the participant to register for and attend the Convention, and to participate in the Convention Activities, the participant (or the participant's parent or legal guardian if the participant is a minor) grants to Civitan International, its employees, agents, assigns, and sponsors, the right to video and/or photograph the participant, and use the video, photo, and or other digital reproduction of the participant's physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet and expressly waive any present, or future compensation rights to the use of the above stated material(s).

PARTICIPANT SIGNATURE: _____ PARTICIPANT PRINTED NAME: _____

PARENT OR LEGAL GUARDIAN SIGNATURE (If participant is under 18 years of age): _____

PARENT OR LEGAL GUARDIAN PRINTED NAME (If participant is under 18 years of age): _____

SECTION B: Package Options

ROOM SIZE (SELECT ONE):

Prices per person

Junior Civitan (4 per room).....	\$250.00
Junior Civitan (3 per room).....	\$315.00
Junior Civitan (2 per room).....	\$390.00
Junior Civitan (single).....	\$465.00

*ADD EXTRA NIGHTS? (SELECT ONE):

Prices per person/per night

Junior Civitan (4 per room).....	\$37.50
Junior Civitan (3 per room).....	\$50.00
Junior Civitan (2 per room).....	\$75.00
Junior Civitan (single).....	\$150.00

*Which extra nights will you be staying?

- Tuesday, June 18th
- Wednesday, June 19th
- Sunday, June 23rd
- Monday, June 24th

**GRAND TOTAL: \$ _____

**Fee must be paid in U.S. funds

Policy 206 | Convention Cancellations: 1. Requests prior to and including twenty-one (21) days before the opening day of the convention shall be subject to a \$25.00 processing charge. The amount paid, less the \$25.00 processing charge, shall be refunded. 2. All other requests will not be eligible for a refund. "No Shows" who preregistered, but fail to claim their registration packet, will receive no refund. There will be no substitutions. 3. Cancellations due to bona fide emergency (death or illness), shall be honored regardless of date and full refund less the \$25.00 processing charge. All requests for refund must be made by contacting the staff liaison to Junior Civitan within fifteen (15) days of the closing date of the convention.