



GLL of Brandon Registration Form

Welcome to GLL of Brandon, Fl. We want to make the most of your commitment to your Enrichment Process. One way of doing this is for you to write down some basic information in advance of your first class. Please fill out the following as completely and legibly as possible. This information is confidential. If you have concerns about the relevance of any information and wish to leave it out, please feel free to do so.

GENERAL INFORMAION

Your complete name: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Home phone: _____ Daytime number: _____

Birth date: _____

Occupation: _____

Skills: _____

Favorite Color: _____

T-shirt Size: S ____ M ____ L ____ XL ____ XXL ____ XXXL ____

Relationship status (circle one):

Single Married Partnered Separated Divorced Widowed

Person to alert in the event of medical emergency: _____

Relationship to you: _____ Phone: _____

PHOTO RELEASE

Permission to use photograph I, _____ grant to START FRESH COUNSELING CENTER INC. and GLL OF BRANDON, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize START FRESH COUNSELING CENTER INC. and GLL OF BRANDON, its assigns, and transferees to copyright, use

and publish the same in print and/or electronically. I agree that START FRESH COUNSELING CENTER INC. and GLL OF BRANDON may use such photographs of me, without any compensation to me, and with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

WAIVER, RELEASE and HOLD HARMLESS AGREEMENT

In consideration of permission granted by START FRESH COUNSELING CENTER INC. and GLL OF BRANDON allowing me to participate in the activities which is sponsored by START FRESH COUNSELING CENTER INC. and GLL OF BRANDON, I represent, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows: 1. I acknowledge that participating in the Activity involves certain risks (some of which I may not fully appreciate) and that injuries, death, property damage or other harm could occur to me or others. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in the all chapter activities, including any associated travel, regardless of whether or not caused in whole or in part by the negligence or other fault of START FRESH COUNSELING CENTER INC. and GLL OF BRANDON, and/or its or their departments, trustees, affiliates, employees, officers, agents or insurers ("Released Parties"). 2. I waive all claims against any of the Released Parties for any injuries, damages, losses or claims, whether known and unknown, which arise during or result from my participation in all activities, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I release and forever discharge the Released Parties from all such claims. 3. I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. 4. I have

carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. I understand it fully and I execute it voluntarily.

SIGNATURE _____ DATE _____

I HAVE RECEIVED AND UNDERSTAND THE CONFIDENTIALITY NOTICE ON THE FOLLOWING PAGES

SIGNATURE _____ DATE _____

Below to be complete by Administration Only

Dates	Dallas and Start Fresh	Check/Number Amount	Credit/Card	Cash Amount	Scholarship	Balance Due

Session 1 and Session 8 lunches are include in tuition _____

Classes Attended/ Absences _____/ _____ Homework _____

Honors _____ Volunteer Community Service Hours by Session 7 _____

Brandon Florida Director Signature _____

Administer Signature _____