

Coffee & Connect Program Participant Registration Form Complete one form per participant

OFFICE USE ONLY						
Receipt #:	Processed:					
Payment:	Cash	Cheque	Debit			

PART A: PARTICIPANT INFORMATION					
Full Name:	Date of Birth (mm/dd/yyy	y): Age):		
Participant Medical Conditions / Allergies / Limitations:					
PART B: ACCOUNT INFORMATION					
Enter an email address to receive program updates:	Email:	Email:			
Primary Phone Number: Secondary Phone Num		er:			
Mailing Address:					
City/Town:	ty/Town: Postal Code:				
PART C: EMERGENCY CONTACTS					
Emergency Contacts must be available during program hours.					
Primary Contact Full Name:	Primary Contact Relation	ship:			
Primary Contact Primary Phone:	Primary Contact Secondary Phone:				
Secondary Contact Full Name:	Secondary Contact Relationship:				
Secondary Contact Primary Phone:	Secondary Contact Secondary Phone:				
PART D: PROGRAM WAIVER					
I release Township of Tiny staff and volunteers from any liability technology-related issues and grant permission for staff and vol solely for assistance, acknowledging any shared data for trouble	unteers to access the partic	cipant's devices and accoun	ts		
Signature of Participant:	Date (yyyy/mm/dd):				
Signature of Parent/Guardian:	Date (yyyy/mm/dd):				
PART E: EXPERIENCE QUESTIONS					
Please indicate your level of experience with digital technology. Please indicat Android device		hether you use an Apple o	or		
□Beginner	□Apple (iPhone/iF	□Apple (iPhone/iPad)			
□Intermediate	\square Android	□Android			
□Advanced					



Project Name:	Da	ate:
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The Corporation of the Township of Tiny 130 Balm Beach Rd W Tiny, ON L0L 2J0

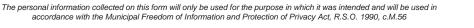
Photo Release Waiver - Authorization and Release

I hereby grant permission to the Corporation of the Township of Tiny, and its officers, trustees, employees, agents, students, representatives, successors, licensees and assigns (hereinafter "the Township") to photograph my image, likeness, or depiction and/or that of my minor children (if applicable). I hereby grant permission to the Township to edit, crop, or retouch such photographs, and waive any right to inspect the final photographs. I hereby consent to and permit photographs of me and/or those of my minor children to be used by the Township for any purpose, including promotional and advertisement purposes, and in any medium, including print and electronic. I understand that the Township may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for the Township's use or publication of photographs of me and/or those of my minor children (if applicable).

I hereby fully and forever discharge and release the Township from any claim for damages of any kind (including, but not limited to, invasion of privacy; defamation; false light or misappropriation of name, likeness or image) arising out of the use or publication of photographs of me and/or those of my minor children (if applicable) by the Township, and covenant and agree not to sue or otherwise initiate legal proceedings against the Township for such use or publication on my own behalf or on behalf of my minor children. All grants of permission and consent, and all covenants, agreements and understandings contained herein are irrevocable.

I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily on behalf of myself and/or my minor children (if applicable).

Signature:		
Print Name:		
Date:		
Print Name of Minor Child(s):		
Print Name(s):		





Contact the Recreation and Special Events Department at recreation@tiny.ca or call (705) 526-4204