

YOUTH PROGRAMS REGISTRATION FORM



School of Professional
& Continuing Education

Registration is not final until registration form and payment are received. Spaces may fill prior to receiving mailed registrations, therefore, registration is not guaranteed. The quickest way to finalize your registration is to submit registration forms and payment online. ***Required fields**

STUDENT INFORMATION

Student First and Last Name*

Grade Level*

Date of Birth*

Mailing Address*

City/State/Zip*

School Division

Meal Preference (Circle One): Regular, Vegetarian, or Gluten Free

Ethnicity

T-Shirt Size: _____

****Does not apply to all programs**

Allergies/Special Needs:

Program Name/Dates*:

PARENT/GUARDIAN INFORMATION

Parent/Guardian First and Last Name*

Parent/Guardian Email Address*

Parent/Guardian Cell Phone*

Parent/Guardian Alternate Phone

ALTERNATE EMERGENCY CONTACT INFORMATION

Alt. Emergency Contact First and Last Name*

Alt. Emergency Contact Cell Phone*

540-568-4253 | youthprograms@jmu.edu | Physical Address: 127 West Bruce St, 3rd Floor, Harrisonburg, VA 22807

James Madison University is an equal opportunity/affirmative action institution.

Rev. 10/2022

YOUTH PROGRAMS REGISTRATION FORM



School of Professional
& Continuing Education

Parent/Guardian Authorization

PHOTO/VIDEO RELEASE: I **do / do not (please circle one)** hereby give JAMES MADISON UNIVERSITY, their assigns and legal representative the irrevocable right to use photograph or video images of my child in all forms and media for education or other lawful purposes in its publications and displays. I waive my right to preview or approve the finished product, including written copy that may be created in connection therewith. I understand no fee will be paid to me now or in the future. I have read this release and understand its contents.

TRANSPORTATION RELEASE: I give permission for my child to be transported to activities, riding in approved vehicles, or walking with staff to attend and participate in camp-sponsored activities on and off campus, should program require.

MEDICAL RELEASE: I also give permission to the leaders of this program to secure emergency medical or surgical treatment for my child if there is insufficient time to contact me, and to secure routine, non-surgical medical care as needed.

WAIVER OF LIABILITY: I agree to indemnify, release and hold harmless James Madison University, the State of Virginia, and their respective officers, agents, employees and volunteers from any and all costs, liabilities, expenses, claims, compensation, demands, or causes of action on account of any loss or damage to person or property of the aforementioned child arising out of or in connection with his/her participation in the aforementioned camp and related camp activities.

Signature of Parent/Guardian*

Date*

Student Code of Conduct (Parent/guardian to review and student to sign)

I will treat fellow students, JMU faculty and staff with respect at all times, including: respectful listening, participation during hands on activities, avoid distracting behavior and follow directions from JMU staff as necessary to ensure a safe and enjoyable experience by all. I understand that the University reserves the right to exclude my participation in this program if my participation or behavior is deemed detrimental to the safety or welfare of others. I understand that cell phones and electronic games are allowed for limited use as permitted during breaks. I understand that the consequences for breaking these rules may include; (1) a warning from the Instructor; (2) meeting with the Youth Programs Director and/or staff; (3) a phone call and/or meeting with the parent/guardian; (4) being asked to leave the program without a refund.

Student Signature*

Date*

Payment Information

Payment **MUST** accompany this form to confirm registration. Checks should be made payable to JAMES MADISON UNIVERSITY (a \$50 fee will be assessed for any check returned by the bank). Credit card payment can only be accepted through online registration. Visit the School of Professional & Continuing Education Youth Programs web page for more info.

Mail or Drop off This Form with Payment:

JMU School of Professional & Continuing Education
Attn: Youth Programs
127 W Bruce St, MSC 6906
Harrisonburg, VA 22807

Withdrawal/Refund Policy:

You may cancel your registration up to three weeks prior to the program start date and receive a full refund. Cancellations made after three weeks prior will receive a 75% refund. Email youthprograms@jmu.edu to request cancellation. No refund will be given for a "No Show" or for a cancellation request received the day before or anytime after the start date of the program. Refunds will NOT be given due to any illness a student may develop while attending a youth program.

540-568-4253 | youthprograms@jmu.edu | Physical Address: 127 West Bruce St, 3rd Floor, Harrisonburg, VA 22807

James Madison University is an equal opportunity/affirmative action institution.

Rev. 10/2022