

Self-Realization Fellowship
HOW-TO-LIVE YOUTH PROGRAMS

REGIONAL DAY PROGRAM – Fremont – Los Gatos, CA

Based on the teachings of Paramahansa Yogananda

Girls — Saturday–Sunday, October 6–7, 2018

Boys — Saturday–Sunday, October 13–14, 2018

Registration

My child/teen's name: _____ Age: _____

Parental Contact Info: Telephone(s): _____ Email: _____

Address: _____

My daughter/son (please circle one) will attend (check all that apply):

Saturday Program _____ at Fremont Senior Center, Lake Elizabeth, Fremont, CA

Sunday Program _____ at SRF Los Gatos Center, Los Gatos, CA

Parental Consent and Release

We, _____, parents of _____, hereby consent to our child/teen's participation in the Self-Realization Fellowship **Regional Day Program (the "Event") October 6–7, 2018 or October 13–14, 2018** to be held at 40086 Paseo Padre Parkway, Fremont, CA, 94538 and at 303 East Main Street, Los Gatos, CA, 95030. We understand and acknowledge that we are solely responsible for our child/teen's transportation both to and from the Event, participation in the Event itself, as well as for overnight housing, should it be required. We further acknowledge that Self-Realization Fellowship neither assumes nor accepts responsibility for providing transportation and lodging or making transportation or lodging arrangements for those participating in the Event.

With full knowledge and understanding of the aforementioned facts and in consideration for the opportunity for our child/teen to participate in the Regional Day Program, we hereby consent and agree to:

Consent

- Our child/teen's participation in any and all activities at the Event, which may include meditation services and inspirational classes and services and spiritual activities
- Have Self-Realization Fellowship video record or take photographs of us and/or our child/teen at the Event, to use and reuse, in any manner determined in SRF's sole discretion, such video recordings and/or photographs, in whole or in part, modified or altered, either by themselves or in conjunction with other video recordings and/or photographs, as well as using our child/teen's written and/or verbal statements regarding his/her experience at the Event and/or spiritual life, in any medium or form of distribution, including, but not limited to, SRF Voluntary League Newsletters, SRF websites, SRF magazines, and/or any other SRF publications to encourage others on the spiritual path.

Release

- Release and hold Self-Realization Fellowship and its officers, directors, monastics, employees, volunteers, representatives, agents, and assigns harmless from any and all liabilities, claims, damages, costs, actions, causes of actions, demands, and losses arising out of our child/teen's participation in the Event, his/her transportation to and from the Event, and/or any lodging associated with our child/teen's participation in the Event.
- Release and hold Self-Realization Fellowship and its officers, directors, monastics, employees, volunteers, representatives, agents and assigns harmless from any and all liabilities, claims, damages, costs, actions, causes of actions, demands, and losses arising out of or in any way related to the video recording and/or taking of our child/teen's photographs, and/or the use of such video recordings and/or photographs and/or our name and/or child's name in connection with such use or reuse, including, without limitation, any and all claims for invasion of privacy and libel.

Dated _____ Signed by _____

Dated _____ Signed by _____

Please note that the signatures of both parents are required for the consent to be valid. If you are a single parent, only your signature is required. Divorced parents are both required to sign unless one parent lives out of state or the parent signing has legal authority to sign on behalf of both parents. Any consent returned with only one signature constitutes your representation, upon which we can rely, that you have the legal authority to sign on behalf of your child alone. Thank you.