



CHRISTIAN HOME EDUCATORS ASSOCIATION

One form per child

Please print

Child's First & Last Name: _____ Age: _____

Parent's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Cell/Pager number(s): _____ or _____

(A number where a parent may be reached DURING the Convention.)

Special medical needs (allergies, medications, etc.) _____

MEDICAL AND LIABILITY RELEASE

I understand and hereby agree to assume all of the risks, which may be encountered by my child at the Children's Program offered by Christian Home Educators Association, Inc.(CHEA) during their convention, and operated by Carr Ministries including activities preliminary and subsequent thereto. I do hereby agree to hold the Pasadena Convention Center, CHEA of Ca, Carr Ministries, their employees and volunteers, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

In the event that my child becomes injured or ill during any game or activity, I authorize CHEA, Carr Ministries, or their representatives to secure first aid and/or the services of a physician or hospital and I agree to assume all financial obligations incurred therewith.

PUBLICITY AND PROMOTIONS RELEASE

I permit Christian Home Educators Association of California to use any photographs, video tapes, motion pictures, recordings or any other records taken while I or my children are at the Christian Home Educators Convention and engaged in any activity or event sponsored, promoted, or organized by Christian Home Educators Association of California and Carr Ministries, including publicity, advertising, or any legitimate purposes.

Signature of Parent or Guardian

Date

P.O. Box 2009 • Norwalk, CA 90651-2009 • 562/8642432 • FAX 562/8643747
www.cheaofca.org • cheainfo@cheaofca.org