



VAFCS 2016 Back to School Backpack Luncheon on August 25*

REGISTRATION INFORMATION MUST BE COMPLETED IN FULL

***Supplies are limited**



I acknowledge that:

- 1) this event is for students within the VAFCS service area only
- 2) all children must be in attendance in order to receive backpacks - NO HOLDS

PARENT/GUARDIAN NAME:

ADDRESS:

CONTACT PHONE NUMBER:

EMAIL:

STUDENT'S NAME	AGE	GRADE	GENDER	FIRST NATION	SCHOOL
1				Y N	
2				Y N	
3				Y N	
4				Y N	
5				Y N	

USE OF LIKENESS DISCLAIMER - The sponsors of the event:

- May video tape sessions and take pictures during the event that may be viewable on their website
- May use your name and likeness on their website and in future materials at their sole discretion and without payment or remuneration of any kind to participants. Participants expressly waive any and all causes of action against VAFCS for the appropriation of participant's name and likeness as well as any other related causes of action, if any

Signature: _____
Date: _____