## ĐƠN XIN THAM DỰ

Training Camp Registration Form

## SA MẠC HUẤN LUYỆN Chuyên Đề Lãnh Đạo "GIÔSUÊ I"

Thời Gian [Date/Time]:Friday (6 PM), May 26, 2017 to<br/>Sunday (3 PM), May 28, 2017Địa Điểm [Location]:Lathrop E. Smith Center<br/>5110 Meadowside Lane<br/>Rockville, MD 20855

1. THAM DỤ VIÊN [APPLIANT'S INFORMATION]						
Miền [Region]:	Đoàn [Chapter]:		Tước Hiệu [Title]:			
			🗆 Huynh Trưởng	g 🛛 Trợ Tá/Trợ Uý		
Tên Thánh [Baptismal Name]:	Họ và Tên [Full Name]:		Giới Tính [Gender]:			
			□ Nam [Male]	🗆 Nữ [Female]		
Địa Chi [Address]:		Thành Phố [City]:		Tiểu Bang [State]:		
Bưu Mã [Zip Code]: Điện Thoại [Phone Number]:		Điện Thư [Email]:				
Tên Người Liên Lạc Khẩn Cấp [Contact Person]: Mối Quan Hệ [R		ationship with Participant]:	Điện Thoại [Phone	e Number]:		

2. PHẦN GIỚI THIỆU [REFERE]	NCES]			
Chấp Thuận của Tuyên Úy Liên Hệ:		Giới Thiệu của Ban Chấp Hành Liên Hệ:		
[Approval of affiliated Chaplain]		[Recommendation from the affiliated Executive Committee]		
Tên [Baptismal Name and Full Name]		Tên [Baptismal Name and Full Name]		
Ký [Sign here]	Ngày [Date]	Ký [Sign here] ∠	Ngày [Date]	
ry [orga nero]	Tiguj [Duto]		[Suj [Duto]	

## 3. THAM DỤ VIÊN KÝ TÊN [APPLICANT'S SIGNATURE]

Ký [Sign here]

Ngày [Date]

4.	THÊM CHI TIẾT [ADDITIONAL INFORMATION]		
	IMPORTANT	Chi Phiếu Viết Cho [Make Check Payable To]:	
•	Ký và nộp đơn lại trước ngày 4 tháng 4 năm 2017	Dan-Uyen T. Lai	
	Sign and submit application before April 4, 2017 ✓ Lệ Phí (Fee): \$60.00 trước ngày 17 tháng 3, 2017	Gởi Đơn Và Chi Phiếu Về [Send Application and Check To]:	
	✓ Lệ Phí (Fee): \$75.00 sau ngày 17 tháng 3, 2017	Tr. Nhung Nguyen ( <u>hnhung.nguyen5@gmail.com</u> )	
•	No Refund for Cancellation made after: 1st of May 2017	P.O. Box 11849 Alexandria, VA 22312	

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## **VOLUNTARY ACTIVITIES PARTICIPATION FORM**

ACKNOWLEDGMENT, RELEASE, HOLD HARMLESS AND ASSUMPTION OF POTENTIAL RISK AGREEMENT

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file with the VEYM Mid-Atlantic Region before a Participant will be allowed to participate in this event. <u>PARTICIPANTS WHO DO</u> <u>NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS AGREEMENT SHOULD NOT SIGN THIS</u> <u>AGREEMENT, AND WILL NOT BE ALLOWED TO PARTICIPATE.</u>

I, the undersigned [*print name*] \_\_\_\_\_\_ ["Participant"] wish to participate in the **Supplementary Leadership Training Camp** – **Giôsuê I** activity of the Vietnamese Eucharistic Youth Movement in the U.S.A. [VEYM], [hereinafter "Activity"], held at Lathrop E. Smith Center in Rockville, Maryland on May 26-28, 2017.

I understand and acknowledge that this Activity may be dangerous and hazardous and, by its very nature pose the potential risk of severe and serious physical and emotional injury/illness, or even death, to all individuals who participate in such Activity.

I understand and acknowledge that in order to participate in this Activity. I agree to ASSUME ALL LIABILITY AND RESPONSIBILITY for any and all potential risks, injuries, or even death which may be associated with participation in such Activity. I represent and warrant that I am mentally and physically fit, capable, able, and willing to participate in this Activity without any limitations.

I understand, acknowledge, and agree that the VEYM, its trustees, employees, agents, coaches, teachers, volunteers, or representatives shall not be liable for any injury/illness suffered by my participation which is incident to and/or associated with preparing for and/or participating in this Activity.

I hereby release, discharge, indemnify, and agree to hold harmless VEYM, VEYM' governing board ["Board"], and each of their trustees, employees, agents, coaches, teachers, volunteers, and representatives free from any and all liability arising out of or in connection with my participation in this Activity, including all related activity such as games, practices, training activities, trips and related exercise. For purpose of this RELEASE, liability means all claims, demands, losses, causes of action, suits, or judgments of any kind that my or my parents, guardians, heirs, executors, administrators, and assigns may have against VEYM, Board, and their trustees, employees, agents, coaches, teachers, volunteers, and representatives because of my personal, physical or emotional, injury, accident, illness, or death, or because of any loss of or damage to property that occurs to my property during my participation in the Activity that may result from any cause including but not limited to VEYM', Board's, trustees', employees', agents', coaches', teachers', volunteers', or representatives' own passive or active negligence or other acts other than fraud, willful misconduct or violation of the law.

I acknowledge that I have carefully read this VOLUNTARY PARTICIPATION FORM and that I understand the potential dangers to engaging in the Activity, am fully aware of the legal consequences of this agreement, and agree to its terms and understand I am waiving certain rights and assuming the risk of damage from my participation in the Activity.

Participant's Signature:

Date: \_\_\_\_\_

Participant's Full Name \_\_\_\_\_