

Club Genesis Registration Form

(Please Print Clearly)

For Office Use Only

Jupiter Mars Mercury Neptune Pluto

Saturn Venus Group: _____

PC KC

Child's Name: _____ Date: _____

Home Address: _____ Zip Code: _____

Pickup Address: (Same as Home Address): _____

Phone: (____) _____ Cell: (____) _____ Date of Birth: ____-____-____

Parent/Legal Guardian's Name(s): _____

Approved Contact(s) at Child's Residence(s): _____

Pertinent Medical Information:

PLEASE TURN CARD OVER TO SIGN RELEASE AND WAIVER > >

Club Genesis

Release and Waiver Form

In consideration of the Child/Participant being permitted to participate in the Club Genesis program, I/we do release, waive, forever discharge, and covenant not to sue Club Genesis/ Cornerstone World Outreach, its governing board, officers, agents, employees, and/or any volunteers acting as employees, from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs and expenses of any nature which Child/Participant may have or which may hereafter accrue to Child/Participant, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by Child/Participant or by any property belonging to the Child/ Participant and/or the undersigned, property belonging to or in the care, custody, and/or control of the Child/Participant whether caused by the negligence or carelessness of the Releasees, or otherwise, while Child/Participant is in, on, upon, or in transit to or from the premises where the Activity or any adjunct to the Activity, occurs or is being conducted.

Signature(s) of Parent(s) or Legal Guardian(s): _____

Date: _____

PLEASE COMPLETE OTHER SIDE ➤ ➤