

## 2014 US Go Congress Youth Attendance Agreement

Neither the AGA, the 2014 US Go Congress, nor the 2014 US Go Congress staff and volunteers (hereinafter sometimes collectively referred to herein as “2014 US Go Congress” or “Congress”) assume any responsibility for youth attending the 2014 US Go Congress. All responsibility is vested with the parents or other legal guardians (hereafter referred to as Legal Guardian) or attending guardian as set out below.

Youth age 17 or younger will be permitted to attend and take part in the Congress only if attending with a Legal Guardian or other person acting as Attending Guardian. Each youth, Legal Guardian, and Attending Guardian agrees to the following terms as a condition of youth attending the Congress:

Each youth is the responsibility of the Attending Guardian, who must be age 18 or over.

Each Attending Guardian is responsible for the health, safety, and well-being of their youth charge(s) throughout the 2014 US Go Congress.

Each Attending Guardian agrees to arrange for appropriate supervision of their charge(s) while their charge(s) is (are) participating in Congress events, on- or off-site, or associated in any way with the ongoing 2014 US Go Congress.

Each Attending Guardian agrees to maintain communication with the Legal Guardian(s) of the aforementioned youth regarding any health or safety issues, as arranged between the Legal Guardian(s) and Attending Guardian, and that the health and safety of the youth are not the responsibility of the 2014 US Go Congress.

The Legal Guardian(s) and Attending Guardian agree that the Congress or any staff thereof may make any pertinent information contained in this document available to medical personnel consulted to provide care for the youth.

The Legal Guardian(s) of the youth by signing this form hereby authorize the Attending Guardian to authorize emergency medical care or other necessary medical services for the youth as needed.

The AGA, the 2014 US Go Congress and 2014 US Go Congress volunteers and staff hereby disclaim all liability, regardless of fault or negligence.

The following information must be completed in full and signed by the Legal Guardian(s), and the Attending Guardian. **The original signed copy must be provided before or at registration.**

## 2014 US Go Congress Youth Attendance Agreement -2

### Youth Personal Information

Name: \_\_\_\_\_  
Last (Family) Name First (Given) Name Middle Name(s)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age as of August 9, 2014: \_\_\_\_  
Month/Day/Year (Western) Age

Home address:

\_\_\_\_\_  
Street Number Street Name Unit/Apt. Number

\_\_\_\_\_  
City State Zip Code Country

Additional information (allergies, health problems, etc.) important for the knowledge of

Attending Guardian: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Addition*

*Medical Insurance Company:* \_\_\_\_\_

*Policy #* \_\_\_\_\_ *Group Plan:* \_\_\_\_\_

*End addition*

### Parent/Legal Guardian Personal Information

Name: \_\_\_\_\_  
Last (Family) Name First (Given) Name Middle Name(s)

Relationship to Youth: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Phone number during Congress: \_\_\_\_\_  
Country Code Area Code Number

Home address:

\_\_\_\_\_  
Street Number Street Name Unit/Apt. Number

\_\_\_\_\_  
City State Zip Code Country

## 2014 US Go Congress Youth Attendance Agreement -3

### Attending Guardian Personal Information

Name: \_\_\_\_\_  
Last (Family) Name First (Given) Name Middle Name(s)

Relationship to Youth: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Phone number during Congress: \_\_\_\_\_  
Country Code Area Code Number

Home address: \_\_\_\_\_  
Street Number Street Name Unit/Apt. Number  
City State Zip Code Country

### Additional Emergency Contact Information

#### Emergency Contact 1

Name: \_\_\_\_\_  
Last (Family) Name First (Given) Name

Relationship to Youth: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Phone number: \_\_\_\_\_

Country Code Area Code Number

#### Emergency Contact 2

Name: \_\_\_\_\_  
Last (Family) Name First (Given) Name

Relationship to Youth: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Phone number: \_\_\_\_\_

Country Code Area Code Number

## 2014 US Go Congress Youth Attendance Agreement -4

I, \_\_\_\_\_ affirm that I am the Legal Guardian of \_\_\_\_\_ (youth). I hereby authorize \_\_\_\_\_ (Attending Guardian) to attend and assume responsibility for \_\_\_\_\_ (youth) at the 2014 Go Congress pursuant to the terms set out above, which I have read, understood and hereby agree to.

I, \_\_\_\_\_ (Attending Guardian), affirm that I am authorized to be the Attending Guardian of \_\_\_\_\_ (youth) at the 2014 Go Congress and I agree to act as Attending Guardian of \_\_\_\_\_ (youth) pursuant to the terms set out above, which I have read, understood and hereby agree to.

I, \_\_\_\_\_ (Legal Guardian) agree to convey this waiver to the 2014 US Go Congress, and understand that without receipt of this document, completed in full and signed, the above-mentioned youth may not attend the 2014 US Go Congress.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attending Guardian Signature

\_\_\_\_\_  
Date

Go Congress 2014 Contact information

Phone: +1 (917) 524-6910

email: Directors:     director2014@gocongress.org Registrars: registrar2014@gocongress.org