



## YOUTH & TEENS 5-DAY AWAKE SUMMER CAMP 6/19 – 6/23/2019

### *Registration Form and Liability Waiver*

Today's date \_\_\_\_\_

Adult or Parent Printed Name: \_\_\_\_\_

Adult or Parent Signature: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

Emergency Contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

The following indicates that I, \_\_\_\_\_ will not hold Universal Door Meditation Center (Thiền Viện Phổ Môn) or the organizers of any adult or youth program liable for any accidental injury, personal injury, death or illness incurred to myself and/or my family members while attending the program activities at 2619 Charles lane, Sugar Land, TX 77498 and 15202 Dora Lane, Sugar Land, TX 77498.

In exchange for participation in the activities held here, I agree that photos or videos taken may be taken and used by the Center. I also agree for myself and for all members of my family, to observe and obey all posted rules and warning, and further agree to follow any oral instructions or directions given by the organizers of the event, as well as assuming full responsibility for personal injury to myself and my family members, and further release or discharge the organizers for any injury, loss, or damage arising out of the use of the facility.

Child's name (last, first) \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ T-shirt size \_\_\_\_\_

Child's name (last, first) \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ T-shirt size \_\_\_\_\_

Child's name (last, first) \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ T-shirt size \_\_\_\_\_

Child's name (last, first) \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ T-shirt size \_\_\_\_\_



Allergies/ Medical conditions, please specific:

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Does your children have any mental health problems, such as significant depression, anxiety, panic attacks? Please describe.

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Please list medications (including prescribed drugs) you take regularly and for what condition(s).

Medications

Condition

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Do you stay overnight?

Yes ☐

No ☐

Capmp fee: ☐ x \$50/day = \$\_\_\_\_\_

**Payment:**

Cash.....

| Check number.....

mail to 15202 Dora lane,  
Sugar Land, TX 77498

| Zelle.....

udmc2001@yahoo.com  
281 565 9718

| Paypal.....

go to www.universaldoor.org  
select "Donate"

**Please note:**

\*If you are unable to attend this retreat, the fee will be used for the next retreat within 6 months, after this time, the fee will be transferred to the Awake Foundation Fund to connect with Awake Zen Master to nourish your Awake merits.

\*If you can not attend full retreat, the amount left from your fee will be transferred to the Awake Foundation Fund to connect with Awake Zen Master to nourish your Awake merits.