

**Booker T. Washington
Empowerment Network, BTWEN**

**Allensworth Trip Registration Form
Saturday, October 8, 2011**

Registration Information:

Adults \$40.00
Youth 18 yrs. and under \$20.00 (No cost for Project Legacy Youth)

Full Name: _____

Address: _____

City & State & Zip: _____

Telephone: _____

Email Address: _____

Age: _____ If under 18 years old, parent or legal guardian must complete guardian information and sign below.

Please list name(s) & telephone number(s) of person(s) to contact in case of emergency:

Parent or legal guardian information if under 18 years old:

Full Name: _____

Address: _____

City & State & Zip: _____

Telephone: _____

Email Address: _____

I will be on the bus with my child: Yes _____ No _____

My child has my permission to go on the trip under the supervision of the chaperones provided:

Yes _____ No _____

Signature _____

Conditions and Responsibilities

This trip is managed by Booker T. Washington Empowerment Network, BTWEN. The participant waives any claim against BTWEN, and its staff, for any damage to, or loss of property, or injury to, or death of persons due to any act of omission of any persons rendering any of the services and accommodation on this trip, or due to any event, happening, misfortune, or occurrence whatsoever. BTWEN, and its staff, will not be held responsible for any delays, substitution of equipment, or any act of omission whatsoever by the carrier, its staff, and the participant hereby waives any claim arising therefrom. If we have fewer participants than intended, we reserve the right to cancel the trip. The right is reserved to decline or accept any person as a member of the trip and to require any individual to withdraw from the trip at any time, if the trip leader deems his/her act of conduct is detrimental to, or incompatible with the interest, harmony, comfort, or well-being of any participant. In the event this trip is cancelled, all monies paid by the participant will be promptly refunded.

I have read and I accept the Conditions and Responsibilities above:

	Signature	
Names of Adults over 18 years old in your party (include yourself): (Print names as you want them to appear on name tags.)		Fee/Person
_____		_____
_____		_____
_____		_____
_____		_____

	Age	
Names of Youth 18 years old and under in your party (include yourself): (Print names as you want them to appear on Reunion Name Badges.)		Fee/Person
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total: \$ _____

A T-shirt is available at an additional charge. (Include cost & sizes). We will order only the number of shirts requested in advance. Include payment for shirts in total cost.

Indicate quantity of each size you are ordering for your party.

T-Shirt, Adult Sizes
Sm____, Lrg____, XLrg____, XXLrg____ \$12 each

Total for shirts ordered: \$ _____

Total of Fee for your party: \$ _____

Mail payment to: BTWEN, P.O. Box 2325, Oakland, CA 94621. Make checks payable to BTWEN. Please call 510-278-1634 if you have questions.