

## Registration

Please complete this registration form and waiver and either (a) fax it to +6-03-78464675 OR (b) email a .jpeg of it to [bigfatlove@mail.com](mailto:bigfatlove@mail.com) OR (c) mail it to ECKANKAR Satsang Malaysia Bhd, D-2-01 SS6/20A, Dataran Glomac, 47301 Petaling Jaya, Selangor, Malaysia. Please send a bank draft or money order for the donation to the address above. ATT: 2008 ASIAN ECK YOUTH RETREAT. The forms and donation should be submitted by 31 October 2008.

<hr/>	Name	ECKANKAR – Member	Yes	No (please circle your answer)	
<hr/>	Date of birth	<hr/>			Address City, Postal code
<hr/>	Email	<hr/>			State, ZIP, Country
<hr/>	Phone	<hr/>			Approximate date and time of arrival

1. Would you like to be informed about future ECK youth events?      Yes    No (please circle your answer)
  
2. Do you have any dietary restrictions or allergies?      Yes    No (If yes, what?) \_\_\_\_\_
  
3. Are you an overseas or outstation participant?      Yes    No

**This registration is binding! It is absolutely necessary for youth under 18 to bring the signed permission form to the 2008 Asian ECK Youth Retreat. Otherwise you are not allowed to attend the Youth Retreat.**

### PERMISSION AND WAIVER (Young Adult participant aged 18 and over)

*In consideration for my attendance at and participation in the 2008 Asian ECK Youth Retreat sponsored by ECKANKAR Satsang Malaysia Bhd, hereafter referred to as "AEYR 08", I hereby waive, release and discharge all claims against ECKANKAR Satsang Malaysia Bhd and their respective officers, volunteers, employees and agents, which may arise out of injuries, damages or losses, which I may sustain in any way from my attendance at the 2008 Asian ECK Youth Retreat and also the voluntary Home Stay Program. I further agree to abide by all terms and conditions put forth for the AEYR 08. I declare that for all damages incurred to third persons, I myself am responsible. I know that the AEYR 08 will take place in Malaysia. All activities outside the AEYR 08 area such as swimming, are carried out at my own risk. I will not attend the AEYR 08 if I am ill or have any health-related conditions requiring special medical care or attention that could affect others at the AEYR 08. If I have any dietary restrictions, I will communicate this in writing in the registration form above. If I am asked to leave the AEYR 08 for failing to abide by terms and conditions, I will be responsible for my transportation from the AEYR 08. I agree that pictures, which are taken of me during the AEYR 08, will be used by ECKANKAR in their publications without further approval.*

### Place, Date and Signature \_\_\_\_\_

### Parents/Legal Guardian of Youth Attendee UNDER age 18 (to be completed by parent/legal guardian of EACH attendee under age 18):

*In consideration for my youth's attendance at and participation in the 2008 Asian ECK Youth Retreat, sponsored by ECKANKAR Satsang Malaysia Bhd, hereafter referred to as "AEYR 08", I hereby waive, release and discharge all claims for negligence against ECKANKAR Satsang Malaysia Bhd. and their respective officers, volunteers, employees and agents and affiliates, which may arise out of any injuries, damages or losses, which he/she may sustain in any way from attendance at the AEYR 08. In addition, I agree to indemnify and not hold ECKANKAR Satsang Malaysia Bhd liable for any such claims. I further agree that my youth will abide all the terms and conditions put forth for the AEYR 08. I declare that for all damages incurred to third persons, I myself am responsible for my youth. I know that the AEYR 08 will take place in Malaysia. I am aware that activities outside the AEYR 08 area such as swimming or hiking, are carried out at my youth's risk. I will not send my youth to the AEYR 08, if he/she is ill or has any health-related condition requiring special medical care or attention or that could affect others at the AEYR 08. I understand that meals will be served during the AEYR 08. If my youth has any dietary restriction or allergies, I will communicate this in writing in the registration form above. If I wish any restrictions on my youth's activity, I will inform my youth and communicate these restrictions on a separate sheet. Should my youth need emergency medical care, I give permission for the supervising adults to secure that care. If my youth is asked to leave the AEYR 08 for failing to abide by terms and conditions, I understand that I am solely responsible for my youth's transportation from the AEYR 08. I agree that photos taken of my youth during the AEYR 08 may be used by ECKANKAR in their publications without further approval. Registration for this event must be signed by both the youth attendee and parent / legal guardian.*

Signed by Youth Attendee: \_\_\_\_\_ Attendee Name: \_\_\_\_\_

Signed by Parent / Legal guardian: \_\_\_\_\_ Place, Date: \_\_\_\_\_ Phone number (for emergency): \_\_\_\_\_