



Junior Leadership Day Camp #3 Form

June 26th thru 30th, 2017 (non-boarding)



Applicant's Name: _____ Date of Birth: _____

School Attended: _____ Grade last completed: _____

Female Male T-Shirt Size: _____ Camper Email Address: _____

Parent/Guardian Name(s): _____

Home Address: _____ (Parent/Guardian) Email Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Day Phone: _____ Evening Phone: _____

Other than Parent/Guardian:

Emergency Contact Name: _____ Relationship to Applicant: _____

Day Phone: _____ Evening Phone: _____

Emergency Contact Address: _____

City: _____ State: _____ Zip Code: _____

Please initial:

Agreement: _____ "I hereby apply to enter my son/daughter/ward in the Junior Leadership Camp at New Mexico Military Institute and will assume the necessary financial obligations. I understand and agree to the Camp regulations which provide that **no refund** will be made if my student is withdrawn or dismissed after the start of Leadership Camp."

Parent's Waiver: _____ The undersigned, as parent or guardian of the above named participant, hereby give permission for the above named participant to enroll in the Junior Leadership Camp during the Camp session in June to be conducted at New Mexico Military Institute. _____ We (I) Hereby release and discharge New Mexico Military Institute, It's officers, agents, instructors and employees, from any and all claims, demands, suits, actions or causes of action which we (I) may now or hereafter have by reason of any illness, injury or accident incurred or suffered by the above named participant while enrolled at New Mexico Military Institute.

***Insurance:** _____ The undersigned acknowledges that New Mexico Military Institute does not carry medical insurance to cover participants. All participating students should be covered under personal or family insurance. We (I) hereby certify, under penalty of perjury, that the above named student, is covered under medical insurance and that this insurance will remain in effect throughout the summer camp session.

***Background:** Have you ever been dismissed from school? *Yes* *No*
 Have you ever had a civil conviction/adverse adjudication? *Yes* *No*

Testing & Photographic Consent & Release: _____ I hereby authorize New Mexico Military Institute and those acting pursuant to its authority to: _____ **Record** my likeness and voice on a video, audio, photographic, digital, and electronic or any other medium, **Use** my name in connection with these recordings, **Use**, reproduce, exhibit or distribute in any medium (e.g. print publications, video tapes, CD-ROM, Internet/WWW) these recordings for any purpose that the Institute, and those acting pursuant to its authority, deem appropriate, including promotional or advertising efforts. **I release** the Institute and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use. **I understand** that all such recordings, in whatever medium, shall remain the property of the Institute.

Signature of Parent or Guardian: _____ **Date:** _____

Signature of Student: _____ Date: _____

Insurance Company: _____ Policy/Group #: _____

Expiration Date of Insurance: _____

Mail Completed Form To:
 New Mexico Military Institute
 Daniels Leadership Center
 Attn: Yolanda Duran
 101 West College Blvd Roswell,
 NM 88201
 Phone: 575-624-8148
 Fax: 575-624-8318
 Email: nmmiprogramsdirector@nmmi.edu

Payment: Checks, Money Orders, or Cash accepted; Payment due by the first day of camp; Registration Fees are non-refundable (No exceptions)
 Make checks payable to: New Mexico Military Institute