

<input type="checkbox"/>	EARLY \$65 BY JUNE 27
<input type="checkbox"/>	ONSITE \$75

TLYM RETREAT **ADULT** LIABILITY FORM



JULY 10-12, 2025 LV Church, El Camp, TX

- PLEASE PRINT CLEARLY WITH BLUE OR BLACK INK
- FILL OUT ALL SECTIONS COMPLETELY
- THERE WILL BE A \$10 FEE ASSESSED FOR ANY INCOMPLETE FORMS

ADULT INFORMATION

FULL LEGAL NAME: _____ GENDER AT BIRTH: _____ BIRTHDATE: _____

MAILING ADDRESS: _____

CHURCH NAME: _____ CITY/STATE/ZIP: _____

PASTOR'S SIGNATURE _____

PLEASE UPLOAD A COPY OF YOUR GOVERNMENT ISSUED ID. FORMS WILL NOT BE PROCESSED WITHOUT A COPY OF YOUR ID.

HEALTH INFORMATION

PLEASE INDICATE IF ANY OF THESE APPLY TO YOU. IF NOT, YOU MUST INDICATE WITH AN "N/A." NO FORM WILL BE ACCEPTED IF BLANK. *FOR EMERGENCY USE ONLY*

HEART:	DIABETES:	EYES:	LUNGS:
EARS:	SKIN:	NERVES:	ALLERGIES:

IF ANY OF THESE CONDITIONS APPLY, PLEASE EXPLAIN: _____

DO YOU HAVE ANY PHYSICAL RESTRICTIONS? _____ EXPLAIN: _____

ARE YOU TAKING ANY SPECIAL MEDICATIONS? _____ EXPLAIN: _____

ARE YOU ALLERGIC TO ANY MEDICATIONS? _____ EXPLAIN: _____

ASSUMPTION OF RISK

I, _____ agree to abide by all the retreat policies. I understand that I will be held responsible for any medical expenses that may occur. I am willing to have a criminal background check done by a law enforcement agency. As a participant in this event, I authorize the Texas Louisiana Hispanic Network of the Assemblies of God to use my likeness in photographs or videos in any and all of its publications and in any and all other media. I will not make monetary or other claim against the Network for the use of such photographs or videos. I also authorize TLYM to run a background check on my behalf. I will be held responsible for any and all damages I may cause to the retreat site or facilities. I understand that I will be responsible for any medical expenses incurred and hold TLYM harmless of any expenses.

SIGNATURE: _____ DATE: _____

EMERGENCY PHONE NUMBER: _____ ALTERNATE PHONE: _____

UPLOAD COMPLETED FORMS TO:
ONLINE GROUP LIABILITY ADULT:
TLYM.ORG/RETREAT

IF YOU HAVE ANY QUESTIONS REGARDING YOUR REGISTRATION, PLEASE CONTACT THE DISTRICT OFFICE AT (281) 407-0719 OR INFO@TLYM.ORG
Cancellation Policy: There will be absolutely NO refunds for any registrations. However, registration may be transferred to another registrant at no additional cost.

