

Expanding Your Horizons Student Registration and Release Form

A parent or guardian must sign this form for a student to be registered.

Registration fee of \$10 covers cost of lunch, conference expenses and materials. Please enclose check (payable to NDSU) with this form and mail to: *Expanding Your Horizons, NDSU Dept 2020, PO Box 5819, Fargo, ND 58108-6050. Registration deadline is February 18!* Preregistration is required. Registration fees refunded until March 10 (by emailing karen.murie@ndsu.edu. Registrants will receive a postcard confirming their registration. **PLEASE PRINT AND FILL IN ALL INFORMATION!**

STUDENT'S NAME _____ HOME/CELL PHONE _____

ADDRESS _____
(Mailing Address) (City) (State) (Zip)

SCHOOL NAME/ CITY _____ GRADE _____ EMAIL (OPTIONAL) _____
DATE OF BIRTH _____

___ Check if you would like to receive further information from NDSU, MSUM and/or Concordia College

INDICATE NUMBER OF FIRST EIGHT CHOICES FOR WORKSHOPS. Put workshop number in blanks provided. Registration is limited to the first 450 applicants. Workshops will be assigned on a first come, first serve basis. Because popular workshops fill up quickly, and we will assign participants to similar workshops if the ones they chose are full. If similar ones are full, we'll assign students on the basis of availability.)

_____ 1st _____ 2nd _____ 3rd _____ 4th _____ 5th _____ 6th _____ 7th _____ 8th

If all of the above workshops are filled, please circle the areas that you are interested in MATH SCIENCE MEDICAL COMPUTER ENGR

If you want to attend workshops with **ONE FRIEND**, please indicate the name of the friend here and be sure to select the same workshops. Your friend's registration form **MUST** accompany your registration form for you to be assigned to the same workshops.

Name of one friend (please print) _____

Please indicate if you have a physical disability, allergy, or have special needs _____

ASSUMPTION OF RISK AND RELEASE

The undersigned hereby releases, waives, discharges and covenants not to sue North Dakota State University, its officers, agents, employees, and OTL-EYH, all of which hereinafter knows as "NDSU" from all liability to the undersigned in consideration of being permitted to participate in: Expanding Your Horizons.

The undersigned, in full recognition and application of the dangers and hazards inherent in the above activity, does hereby agree to assume all the risks and responsibilities surrounding my participation therein, and further, do for myself, my heirs, and personal representatives, hold harmless, release and forever discharge NDSU from and against any and all liability, damages, claims, demands, actions, or causes of actions, on account of damage to personal property or personal injury or death which may result from my participation therein whether caused by the negligence of NDSU or otherwise. The undersigned hereby assumes full responsibility for, and risk for bodily injury, death or property damage due to the negligence of the releases or otherwise while in, about or upon the premises of NDSU, or while participating in the above described event.

IN WITNESS WHEREOF, I have caused this release to be executed this day.

PARENT/GUARDIAN Signature Printed PARENT/GUARDIAN Name Relationship to Student DATE Phone

In an emergency, if I cannot be reached, contact (preferably another parent or legal guardian):

Name Relationship to participant Phone

Please indicate if photographs of your child or other reproductions of your child's likeness may be used in future EYH materials, including EYH websites (without name): _____ YES _____ NO

North Dakota State University does not discriminate on the basis of age, color, disability, gender expression/identity, genetic information, marital status, national origin, public assistance status, race, religion, sex, sexual orientation, or status as a U.S. veteran. Direct inquiries to: Equal Opportunity Specialist, Old Main 201, 701-231-7708 or Title IX/ADA Coordinator, Old Main 102, 701-231-6409.