



**MONEY MATTERS FOR TEENS SEMINAR**

**REGISTRATION FORM**

**This form should be completed for any minor (anyone under the age of 19). This form should be completed and signed by the parent or guardian of listed minor child. Cost of attending is \$15.00 due by June 1, 2015. Checks or money orders only can be mailed to Kevin Swann Enterprises, P.O. Box 8199 Hampton, VA 23666.**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent(s)/Guardian(s) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Your relationship to child: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Current High School Youth Attends:  
\_\_\_\_\_

Youth's email address: \_\_\_\_\_ Youth's T-Shirt Size: \_\_\_\_\_

What grade youth will be in for the upcoming 2015/2016 school year:  
\_\_\_\_\_

Does your child have any medical problems we need to be aware of? If so, explain:  
\_\_\_\_\_

Does your child take any medications? If so, please list:  
\_\_\_\_\_

Do we have permission to provide necessary medical treatment to your child if we are unable to contact you in case of an emergency?

Yes \_\_\_\_\_ No \_\_\_\_\_

I, the undersigned (parent /guardian) of \_\_\_\_\_ do hereby agree to allow my child to attend the Money Matters for Teens Seminar sponsored by Kevin Swann Enterprises, Inc. I do hereby waive any and all liabilities that Kevin Swann Enterprises, Inc. or its agents or representatives for injuries that may befall my child as the result of engagement in such activities. This seminar registration constitutes your consent to any use and any and all media and formats, whether now known or hereafter devised throughout the universe and perpetuity, of your/your child's appearance, voice, and name for any purpose whatsoever, without any further action required or any remuneration payable to you/your child. You understand that all photographing, videotaping, and/or recording will be done in reliance on this consent.

\_\_\_\_\_  
**Parent/Guardian signature**

\_\_\_\_\_  
**Date**