



Guest Information

First Name: _____ Last Name: _____

Name as you would like it to appear on name tag:

Age/DOB: _____ Gender: Female: ____ Male: ____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Emergency Contact: _____

Emergency Contact Phone: _____

Health Concerns: _____

Wheelchair: Yes: ____ No: ____

Will Guest need a "Buddy"*? Yes: ____ No: ____ One will be provided.

*A Buddy will accompany each Guest for the entire evening

Special Communication Needs: No: ____ Yes: ____ If yes, please explain:

Sensory Issues/Concerns (strobe lights, camera flashes, loud noises, etc.):

Allergies: _____

(Please list any that apply: food, latex, makeup, plant or pollen allergies, etc.)

Food Needs (food cut up, gluten free, etc.): No: ____ Yes: ____ If yes, please explain:

*Pureed meal service not provided

Night to Shine Parent/Caretaker Media & Liability Rights Release

By signing below, and for the good and valuable consideration of participating in an event hosted by Redemption Christian Church, and sponsored in part by or associated with the Tim Tebow Foundation, I hereby give my full consent to Tim Tebow Foundation, Inc., ("TTF") a Georgia nonprofit corporation headquartered in Florida and Redemption, an Indiana nonprofit corporation, to record, by writing, by video, photographic, or audio recording device, or by any other analog or digital means, my actions, physical likeness, biographical information, and/or voice. Additionally, I hereby grant to TTF and Redemption, without royalty or other compensation now or in the future, all rights of every kind and character whatsoever, in perpetuity, in and to any and all such recordings, along with any additional recordings I might provide to TTF and Redemption, and to any benefits inuring to TTF and Redemption as a result of its use of any of the foregoing recordings. Among other things, TTF and Redemption may, but are not required to, copy or reproduce the recording, edit or modify it, incorporate it into another work, display or broadcast it or any of the foregoing privately or publicly, and use or license it or any of the foregoing for use by others, all for the sole benefit and at the sole discretion of TTF and Redemption, for the advancement of TTF and Redemption's exempt charitable purposes. All permissions granted herein extend to any successor or assign of TTF and Redemption and bind me and my heirs, successors, and assigns. I, hereby release and discharge and agree to hold harmless TTF and Redemption, its directors, officers, employees, volunteers, and independent contractors, from any and all claims or damages, including but not limited to defamation or violation of rights of privacy or publicity, arising from or associated with the recording or use of the recordings. This release shall be construed, interpreted and governed in accordance with the laws of the State of Florida, and should any provision of this release be determined invalid, such invalidity does not affect any of the remaining provisions. I am of full age and have the right to contract in my own name.

AGREED TO AND ACCEPTED:

Parent/Caretaker Information

1. Name of Parent/Caretaker: _____ Date: _____

Signature of Parent/Caretaker: _____

Address: _____ Telephone: _____

City/State/Zip: _____ Email: _____

Participant Information

Name: _____

Night to Shine Participant Media & Liability Rights Release

By signing below, and for the good and valuable consideration of participating in an event hosted by , Redemption Christian Church and sponsored in part by or associated with the Tim Tebow Foundation, I hereby give my full consent to Tim Tebow Foundation, Inc., (“TTF”) a Georgia nonprofit corporation headquartered in Florida and Redemption, an Indiana nonprofit corporation, to record, by writing, by video, photographic, or audio recording device, or by any other analog or digital means, the actions, physical likeness, biographical information, and/or voice of me and/or any person of whom I am the parent or legal guardian, including minor children (collectively referred to as the “Participants”). Additionally, I hereby grant to TTF and Redemption, without royalty or other compensation now or in the future, all rights of every kind and character whatsoever, in perpetuity, in and to any and all such recordings, along with any additional recordings I might provide to TTF and Redemption, and to any benefits inuring to TTF and Redemption as a result of its use of any of the foregoing recordings. Among other things, TTF and Redemption may, but are not required to, copy or reproduce the recording, edit or modify it, incorporate it into another work, display or broadcast it or any of the foregoing privately or publicly, and use or license it or any of the foregoing for use by others, all for the sole benefit and at the sole discretion of TTF and Redemption, for the advancement of TTF and Redemption’s exempt charitable purposes. All permissions granted herein extend to any successor or assign of TTF and Redemption and bind the Participants and their heirs, successors, and assigns. I, on behalf of all Participants, hereby release and discharge and agree to hold harmless TTF and Redemption, its directors, officers, employees, volunteers, and independent contractors, from any and all claims or damages, including but not limited to defamation or violation of rights of privacy or publicity, arising from or associated with the recording or use of the recordings. This release shall be construed, interpreted and governed in accordance with the laws of the State of Florida, and should any provision of this release be determined invalid, such invalidity does not affect any of the remaining provisions. I am of full age and have the right to contract in my own name and for each Participant.

AGREED TO AND ACCEPTED:

Name of Participant: _____ Date: _____

Signature of Participant (if over age 18): _____

Signature of Parent/Caretaker (if participant is under age 18): _____

Address: _____

Telephone: _____

City/State/Zip: _____

Email: _____

COMMUNICATIONS:

I acknowledge TTF staff members and/or volunteers may contact the Participant to discuss their experience at the event, encourage, pray for, or receive general updates. I hereby give my full consent to TTF to contact the Participant after the event directly through the following means:

_____ Telephone _____ Text Messages _____ Email _____

Please maintain contact through the parent/guardian only _____ I do not give permission for TTF staff to contact the Participant

Signature of Parent/Caretaker Date