



CHCP DRAGON & LION DANCE TEAM APPLICATION/WAIVER

Dear Applicant,

Please fill out this form completely and send to mike.mak@chcp.org.



Today's Date: _____

First Name(Print)_____ Last:_____

Home Address:_____

Home Phone:_____ Cell:_____

Email:_____

Grade: _____ School of Attendance:_____

*Practices are held on weekends at History Park San Jose Plaza/CAHM, 635 Phelan Ave., San Jose

Applicant Signature/Date:_____

FATHER'S NAME/CELL PHONE/EMAIL (Print)_____

MOTHER'S NAME/CELL PHONE/EMAIL_____

EMERGENCY CONTACT NAME/HOME PHONE/CELL:

Waiver of Liability (Parent/Guardian must sign for student)

I consent to the above-named student/adult participating in the Chinese Historical and Cultural Project (CHCP) Dragon & Lion Dance Team activities, and I understand that I will assume the risk of accident or injuries sustained from whatever cause in connection therewith. I release History San Jose (HSJ), CHCP and its board members and staff from any liability involving any such accident or injury.

Also I grant permission to CHCP to use the above-named student/adult's name and any photograph, videography, motion picture or recording for any publicity, education and promotion purposes without obligation or liability.

Signature/Date:_____