



Return with payment to:
PA East HOBY Alumni Chapter
c/o Justin Ledesma
1137 Hollywood Ave.
Havertown, PA 19083

Consent & Acknowledgement of Risk Form

(Please print legibly)

Participant's Name: (please print) _____

Activities: All PA EAST HOBY alumni activities for 2009
Dates: Monday, June 29, 2009 through December 31, 2009

IN CONSIDERATION of the right to attend and participate in the Activities described above, the Participant (and, if the Participant is a minor, his or her parent or legal guardian) hereby:

1. Agrees to abide by all rules and regulations established by Hugh O'Brien Youth Leadership (HOBY);
2. Authorizes HOBY or any of its agents to provide, obtain, or authorize any reasonable incidental and/or emergency medical treatment for the Participant, in the event of the Participant's illness, injury, or incapacity, and hereby accepts the responsibility to pay for such treatment;
3. Grants to HOBY for any purpose connected with promoting the purposes and goals of HOBY, but not for commercial exploitation, the right to use the Participant's name, voice, and likeness in any writings, photographs, films, and recordings of the Participant while he or she is participating in the Activities, and any biographical information submitted by the Participant to HOBY, and to use, reproduce, publish, and distribute the same.
4. Acknowledges that there is an element of risk involved in any activity involving travel outside of one's own home or community; certifies that the Participant is physically, mentally, and emotionally capable of attending and participating in the Activities; assumes all risk of and financial responsibility for any loss or injury to the Participant or others that may occur as a result of the Participant's negligence or misconduct; and indemnifies and holds HOBY harmless from and against any and all costs, claims, demands, charges, liabilities, obligations, judgments, executions, costs of the suit and actual attorneys' fees incurred or suffered by HOBY as a result of, or arising out of, the Participant's negligence or misconduct;
5. Agrees to immediately advise in writing the person in charge of the HOBY event and/or HOBY International of any injury, illness, or loss that occurs to the Participant during the event;
6. This Consent and Acknowledgment of Risk shall not be amended, supplemented, or abrogated without the written consent of HOBY's International Office in Los Angeles, California;
7. The Participant (and, if the participant is a minor, his or her parent or legal guardian) has read this Consent and Acknowledgment of Risk, and understands its contents.

Signature of Participant: _____ Date: _____

IF PARTICIPANT IS A MINOR, SIGNATURE OF HIS/HER PARENT/GUARDIAN IS REQUIRED:

Name of Parent/Legal Guardian: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Signature of Parent/Legal Guardian: _____ Date: _____



NJ HOBY & PA EAST HOBY INVITE YOU TO JOIN US
FOR A HOBY REUNION AT SIX FLAGS GREAT
ADVENTURE & WILD SAFARI ON
MONDAY AUGUST 17!

TICKETS ARE *ONLY* **\$35.00** & THAT INCLUDES PARK
ADMISSION AND AN ALL YOU CAN EAT BUFFET LUNCH!
(HAMBURGERS, CHICKEN NUGGETS, MACARONI & CHEESE, TOSSED SALAD
UNLIMITED BEVERAGES & ICE CREAM)
ALL FOR **\$35.00!**

Please complete this form & mail with payment to:
PA EAST HOBY
c/o Justin Ledesma
1137 Hollywood Ave.
Havertown, PA 19083

***Make checks payable to PA EAST HOBY* Do NOT send cash!**

Name: _____

Address: _____

Phone: _____

Email: _____

_____ # of tickets x \$35.00 = _____ (total due)