



Participant Application

Name: _____

Nickname: _____

Address: _____

City: _____ State: _____ Zip: _____

School Name: _____

Email Address: _____

Telephone: _____ Cell: _____

Date of Birth: _____

Country of Citizenship: _____

Place you designate as your hometown: _____

Parent/Guardian Name: _____
Parent/Guardian Address: _____
Parent /Guardian Phone: _____

Tell us a little about you and why you would like to be a part of Diverse Daisies?



Participant Application

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Tell us a little about you and why you would like to be a part of Diverse Daisies, continued...

Tell us what you can contribute to the Diverse Daisies group:



Participant Application

I understand I will be responsible for finding my own transportation to the monthly events.

<hr/> Signature	<hr/> Date

Please **Sign** and **Mail** this Application, References and Release Agreement information to:

Diverse Daisies Organization
115 North 1st Street
Minneapolis, MN 55401

If you have any questions, you can email info@diversedaisies.org
Please allow us 2 weeks for application processing.

Thank you!

References

**Please provide us with 2 references we can contact.
References need to be over the age of 18.**

References #1

Name: _____

How long have you known them?: _____ Relationship: _____

Phone: _____

Email: (Optional) _____

References #2

Name: _____

How long have you known them?: _____ Relationship: _____

Phone: _____

Email: (Optional) _____

**DIVERSE DAISIES
AGREEMENT TO PARTICIPATE
IN ACTIVITY
RELEASE AND INDEMINIFICATION**

Participant _____ Adult _____

In consideration of participation in Activities sponsored by Diverse Daisies, the above Participant and her parent or legal guardian ("Adult") hereby agree as follows.

1. Diverse Daisies will sponsor various Activities from time to time as communicated to the Participant. Participant shall be solely responsible for arranging timely transportation to and from the site of the Activity.
2. While attending the Activity, the Participant will follow the instructions of Diverse Daisies representatives and agrees at all times to conduct herself in a compliant and respectful manner.
3. Diverse Daisies may use, without compensation to the Participant, the photographs, videotapes, writings or recordings of a Participant, and may publish or reproduce the same in any media, for purposes of promoting or evidencing Diverse Daisies' mission, objectives and activities.
4. The Participant agrees to assume all risk, liability or loss arising out of or related to the Activity, including property damage, injury or death whether due to the nature of the Activity itself or the action or inaction on the part of the Participant, another participant, an individual affiliated with or representing Diverse Daisies or the individuals or entities affiliated with the site where the Activity takes place. In consideration for taking part in the Activity, the Participant and Adult, on behalf of themselves, their heirs and assigns, hereby release Diverse Daisies, its employees, officers, directors, agents and volunteer representatives from any and all liability arising from or in any way related to the Activity. Without limiting the generality of this paragraph, in the event of accident, injury or illness, representatives of Diverse Daisies may take such action as they deem appropriate to administer emergency care and/or to authorize the administration of urgent or emergency care, and the performance of such diagnostic or anesthetic procedures, as in the judgment of Diverse Daisies representatives, appear appropriate under the circumstances. In this regard, the Participant and Adult understand that individuals affiliated with Diverse Daisies do not have any specialized or general emergency medical training.
5. The Participant and Adult hereby agree to indemnify Diverse Daisies, its employees, officers, directors, agents and volunteer representatives from any and claims against or liability, damage or loss incurred by Diverse Daisies as a result of any claim attributable to, or in any way related to, the actions or inactions of the Participant or the Adult.

Parent/Guardian

Date

Participant

Date