A. D. S. A. - Individual Membership Form 2014 - 2015 School Year

Cost of Individual Membership is **\$20/yr**. Please submit this sum to your Debate/Speech coach who will send ONE consolidated school cheque to the ADSA office. Cash payments or personal cheques, sent directly to the office, will be returned to the recipient and the student will not be registered!

PLEASE PRINT CLEARLY

STUDENT NAME:				
(First Name)			(Last name)	
NAME OF SCHOOL:				GRADE:
STUDENT EMAIL: In providin	g your email you wi	ill be part c	of the ADSA Data Bas	e for future Communications!
CHECK ALL THAT APPLY: Debate	Speech	Both	New Member:	Returning Member:
LIST PREVIOUS NATIONAL EXPERIEN	ICE:			
COACH'S NAME:				
PARENT/GUARDIAN:			(Last Name)	
HOME ADDRESS:				
, Alberta			(Postal Code)	
HOME PHONE NO: ()	•		_CELL NO: ()
PARENT SIGNATURE:		Date:		
PARENT EMAIL:				

In signing this form parents also confirm they have read the ADSA Code of Conduct below and realize that any deviation from the Code of Conduct places their child's debate participation at risk.

11.3 PARENTS AND SPECTATORS:

a.Parents and spectators, both student and adult, will demonstrate courtesy and good sportsmanship by positive encouragement (before and after a debate) for their team/children.

b. Parents and spectators will demonstrate respect towards opponents, coaches, judges and tournament organizers.

c. In the event of a complaint, parents and spectators are only permitted to approach their team/child's coach, who will then approach the tournament organizer (in that order). Parents, spectators and coaches will not approach opposing teams, coaches or judges after a debate has been completed, unless to communicate their appreciation to the volunteers for their efforts.

PLEASE COMPLETE PAGE 2 ON BACK!

ALBERTA DEBATE AND SPEECH ASSOCIATION

Liability Release, Waiver of Rights, Insurance Agreement and Consent to Participate only on Basis of Assuming Liability

<u>Warning:</u> This document limits the liability of the Alberta Debate And Speech Association (the "ADSA") and certain other persons and organizations.

This form must be signed and returned by each student member wishing to participate in any sponsored, sanctioned and/or supported debate and/or speech events, in the province of Alberta, for the current year as noted on page one of this document (and in the case of a student member under the age of majority, also by the student member's parents or guardians) as a condition of the student member being permitted to attend events.

Full name of Student Member: _____

_____(PLEASE PRINT)

I (or we), the undersigned, being the above-named student member (and, if applicable, the parent(s) or guardian(s) of the said student member), hereby consent to my (or his or her) participation in the all ADSA sponsored, sanctioned and/or supported debate and/or speech events in the province of Alberta, for the current year, as noted on page one of this document.

In consideration of my (or his or her) being permitted to be a student member to all events, and the organizers of these events, the agents, officers, servants, employees and representatives of the foregoing organizations ("the ADSA and Event Organizers") organizing the said Events and permitting me (or him or her) to participate in it, I (or we) hereby release the ADSA and the all Event Organizers from liability for any negligence, accident, injury, sickness or loss, which may occur to me (or him or her or us) during the course of any Events, or while travelling to or from them, whether caused through the negligence of the ADSA or the Event Organizers or howsoever. I (or we) agree that for the purposes of this document, the ADSA is the agent and the trustee for Event Organizers in Alberta, and I (or we) make this agreement with the ADSA both personally and as agent and trustee of the persons and Event Organizers in Alberta.

I (or we) agree to be responsible for insuring myself (my or our child or my or our ward) against all above-named risks; I (or we) agree to indemnify and save harmless the ADSA and all Event Organizers from any loss or damage from the above-named risks; and I (or we) agree to accept liability for any damage or injury done by myself (or my or our child or my or our ward) while attending or travelling to or from any such Events.

I (or we) voluntarily give the ADSA and Event Organizers permission to be included: in any photographs, motion picture films, including video and digital recordings, and/or audio recordings, in whole or in part, taken of the student member during the time that they are involved with the ADSA. These may be used by the ADSA and its assignees, in whatever way they desire, including, but not limited to publishing in printed materials, You Tube, on web sites and in video productions. Furthermore, I (we) understand that such photographs, recordings or printed materials, such as achievement results, shall be the property of the ADSA, which has the right to any use, as deemed necessary, free and clear of any claim on my (our) part.

IN WITNESS WHEREOF I (or we) have signed this form on this _____ day of _____, 20____.

Student Name (print)

Guardian Name (print)

Student Signature

Guardian Signature