

FARM BUREAU'S CAPITOL EXPERIENCE
(insert date here)

Registration Form for Sponsors & Conferees

A non-refundable Registration Fee of \$25.00 includes a hot breakfast, lunch and materials. Registrations will be accepted through February 1, 2005 or until the session is full. **A total of five participants (students & sponsors) per county** will be accepted. Please keep in mind that the session will fill up quickly! Your registration fee will be returned if the session is full.

Name _____ Sponsor _____ or Conferee _____ Grade _____

Address _____ City _____ KS, Zip _____

Area Code & Telephone # _____ County _____

Local Senator _____ Local Representative _____

(Need help? Go to www.kfb.org, click on "CAPWIZ", scroll down to "Find Your Elected Officials")

SPONSORING COUNTY FARM BUREAU, PLEASE COMPLETE THIS SECTION

Sponsored by: _____ County Farm Bureau

Approved by: _____ Title: _____

Student Participation and Medical/Dental Care Authorization

I/we hereby give permission for my child to participate in the Capitol Experience program. I/we hereby give permission to Capitol Experience staff/officials to call a doctor or emergency medical service and for the doctor dentist, hospital, or medical service to provide emergency medical/dental or surgical care for my child (print child's name in space provided) _____.

Should an emergency arise I/we agree to accept the expense of such treatment.

(PARENT OR GUARDIAN'S SIGNATURE) DATE _____

Name of insurance provider: _____ Policy # _____

In case of emergency contact:

Name: _____

Home phone: _____ Work phone: _____

Photo/Media Release (must be signed to be included in the county picture)

I grant Kansas Farm Bureau the right to use, produce, assign, and/or distribute photographs of me (my child) for use in materials they may create such as a media release for the local newspaper or a photo on the website www.kfb.org.

Signature of conferee if over 18 years old DATE _____
(PARENT OR GUARDIAN'S SIGNATURE IF CONFEREE IS UNDER 18)

() Please see reverse side for Student Code of Conduct.

Student Code of Conduct

As a participant in this Kansas Farm Bureau event you will be expected to:

1. Attend all sessions in the planned program.
2. Dress, use language and behave in a manner that will bring respect to you.
3. Know the use of tobacco, alcohol and non-prescription drugs is illegal and prohibited.
4. Courtesy toward speakers and others in our group is mandatory.
5. Treat program areas and transportation vehicles with respect and care. You will be financially responsible for any damage, theft, or misconduct in which you participate.
6. Live up to your highest expectations for yourself.

I have read the Code of Conduct and agree to live up to the expectations.

Signature of Conferee

Date

As the parent or guardian of _____ I have read the Code of Conduct and will support the sponsors in the performance of their responsibilities to see that the appropriate behavior is maintained.

Parent/ Guardian Signature

Date