



3050 Walkent Dr. NW  
 Grand Rapids, MI 49544  
 616.784.THE3  
 www.3mp.org  
 info@3mp.org

## Visitor Registration

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: M F

Address: \_\_\_\_\_  
(street and number) (city) (state) (zip code)

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Graduation Year: \_\_\_\_\_ Church: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Visitor Code of Conduct:** It is the intent of the Three Mile Project to provide an environment in which all visitors can experience a sense of safety, belonging, and respect. In order to maintain this atmosphere, the following behaviors are strictly prohibited:

- |                              |  |                                     |
|------------------------------|--|-------------------------------------|
| * possession of weapons      | * being under the influence of drugs or alcohol    | * use of tobacco or vaping products |
| * fighting                   | * possession of alcohol or illegal drugs           | * grade/age violation               |
| * vulgar/abusive language    | * destruction/misuse of property                   | * public displays of affection      |
| * abusive/harassing behavior | * suggestive, inappropriate, or revealing clothing |                                     |

Visitors who choose not to meet these expectations will be held accountable for their behavior. Our response to inappropriate behavior may include verbal warnings, expulsion from the facility, calls to parents, and, when warranted, contact with law enforcement agencies. Your signature below indicates that you understand and agree to abide by this code of conduct:

\_\_\_\_\_  
(student signature)

\_\_\_\_\_  
(date)

### Parent Section

Mother/Female Guardian:

Father/Male Guardian:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**Waiver and Release of Liability:** I, being the parent or legal guardian of the above-named minor, in consideration of such minor's attendance at the Three Mile Project ("3MP"), do recognize that the minor's participation in activities, including but not limited to physical activities at the 3MP, is voluntary and do agree to release, discharge, hold harmless, and indemnify the 3MP, its employees, officers, directors, volunteers, agents, and representatives from any and all claims, demands, damages, rights of action, causes of actions, expenses, or any liabilities whatsoever that may arise on account of or in any way related to, my or my minor's child attendance at and/or participation with the 3MP.

**Emergency Medical Information:** In the event I cannot be reached in an emergency, I hereby give permission to any physician, surgeon, clinic, or hospital to secure treatment and anesthesia for the minor named in this registration. In the event it becomes necessary to seek treatment for the minor, I agree to be solely responsible for all medical bills/costs, and I agree to hold the 3MP and its employees, officers, directors, volunteers, agents, and representatives free and harmless of any and all claims, demands, damages, rights of action, causes of actions, or any liabilities whatsoever that may arise from the giving of such consent so long as treatment is administered by or under the supervision of trained medical personnel.

**Photograph and Likeness Release:** I understand that photographs and videos are regularly taken of activities at the 3MP. Although 3MP staff does their best to ask visitors for permission before taking their photograph, I also give permission for the minor to be photographed or videotaped for use in promoting 3MP activities, whether in print, video, or on the Internet.

I understand and agree that all waivers and releases in this form are binding on my estate, heirs, successors, and assigns.

\_\_\_\_\_  
(signature of parent or legal guardian)

\_\_\_\_\_  
(date)

In case of emergency we will first attempt to contact parents/guardians at numbers listed above. If we are unable to reach parents/guardians, who else should we contact?

Emergency Contact 1: \_\_\_\_\_  
(name) (home phone) (cell phone)

Emergency Contact 2: \_\_\_\_\_  
(name) (home phone) (cell phone)