

This seminar is for youth in Grades 6 through Grades 12

COST: \$15 PER CHILD

NOTE: MUST HAVE ONE PAID ADULT PRESENT FOR EVERY FOUR YOUTH

For more information contact: Ruth M. Page (401) 737-6788

Make checks payable to **NEBIRC**

Mail completed registration form and permission slip (one per child) to:

**Bill Stafford - NEBIRC
3 Central Court
Woburn, MA 01801-4512**

REGISTRATION FORM for Youth Investing Seminar

Child's Name _____
Address _____
City/State/Zip Code _____
Phone _____ E-Mail _____

PERMISSION SLIP for NAIC/BetterInvesting Youth Investing Seminar

I consent to my child's participation in the event described above. In consideration of my child's participation in this event, I hereby release, indemnify and hold harmless NAIC/BetterInvesting, its officers, directors, employees and agents acting in the scope of their authority, from any and all claims, including negligence, that I or my child may have arising out of his/her participation in this event.

I authorize NAIC/BetterInvesting to obtain necessary medical treatment for my child in case of illness, injury or accident.

Name of Child

Name of Parent

Date

Parent's Signature

Phone Number where parent can be reached during time of event

Additional phone numbers

Is your child on any medications that will affect his/her ability to participate? If yes, please indicate.

Does your child have any condition that will limit his/her ability to participate in this planned program? If yes, please indicate. _____