

## Belle Vernon Area Reality Tour

## **Registration Form**

Site: Belle Vernon Area High School 425 Crest Ave. Belle Vernon, Pa 15012

Mail form to address indicated below. Time: 6-8:30 P.M. Arrive: 5:30 P.M.

Must choose 2 possible dates. Indicate a 1 and 2 beside the selections.

2023 Oct. 16 \_\_\_\_ Dec. 11 2024 Feb. 12\_\_\_\_ April 22

**Presenting Organization: Rostraver Township Lions Club** 



I agree to allow my child/children age/ages			to participate		
		understand the program is appr	opriate for children		
	<b>:hild's</b> parent / <u>legal</u> gaurdian n				
My signature below indicate demands, actions or lawsuits	s that I have read the above and agree not s that could arise as a result of my particip	of child's legal guardian if atter t to hold CANDLE, Inc. or its affiliates liable ation or my minor child's participation in Re ur are emotionally charged and I understar	for any claims, damages, eality Tour. I am aware news		
		the Reality Tour includes the following y Room / Overdose Funeral Scene	•		
X	x	x			
SIGNATURE OF PARENT		PRINT NAME HERE	DATE		
Address:	City:	State:	Zip:		
Phone #	Email:	School District:			
Enter name, age, and grade of youth attending. List <u>ALL</u> adults attending as well.					
1	2	3.			
4	5	6.			
REGISTRATION = FREE		Mai	l Now!		
TOTAL PERSONS	ter Every Person Attending  ATTENDING				
Donation to support the Reality Tour = \$			Mail to:		
Total amount Enclosed = \$		301 Cen	301 Center Street		

If you do not show up for the tour you registered for,

YOU MUST RE-REGISTER

**ONLINE REGISTRATION AVAILABLE:** 

www.eventbrite.com SEARCH: Belle Vernon Area Reality Tour

Belle Vernon, Pa 15012

**Limited Seating**