



SPONSORED BY THE **TIM TEBOW**
FOUNDATION™

Night to Shine is an unforgettable prom night experience, centered on God's love, for people with special needs ages 14 and older. On one night, February 9, 2018, more than 500 churches from around the world will come together to host Night to Shine for approximately 90,000 honored guests through the support of 175,000 volunteers!

To see more of what it's all about go to www.nighttoshine.com

**Guest Registration Form for
2018 Night To Shine: February 9, 2018 from 6-9pm at the
Lawrenceville Church of God, 3131 Fox Hollow Road, Springfield
Ohio, 45502**

(We have openings for guests for the prom and for dinner, they will be accepted on a first come first serve basis. Please sign yourself or your loved one up as soon as possible. (All applicable liability forms must be completed and sent, in order to attend)



Night to Shine is an unforgettable prom night experience, centered on God's love, for people with special needs ages 14 and older. On one night, February 9, 2018, more than 500 churches from around the world will come together to host Night to Shine for approximately 90,000 honored guests through the support of 175,000 volunteers!

To see more of what it's all about go to www.nightoshine.com

Guest Registration Form for

2018 Night To Shine: February 9, 2018 from 6-9pm at the Lawrenceville Church of God, 3131 Fox Hollow Road, Springfield Ohio, 45502

(We have 75 openings for guests for the prom and for dinner, they will be accepted on a first come first serve basis.

Please sign yourself or your loved one up as soon as possible.

Registrations must be in by January 19, 2018.

(All applicable liability forms must be completed and sent, in order to attend)

Guest Information

First Name: _____ Last Name: _____

Name as you would like it to appear on name tag: _____

Age/DOB: _____ Gender: Female: Male:

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Fun Fact About You: _____

Emergency Contact during event: _____

Emergency Contact Phone: _____

Health Concerns: _____

Wheelchair/Accessibility Device Dependent: Yes: No:

Special Communication Needs: No: Yes: If yes, please explain:

Sensory Issues/Concerns (strobe lights, camera flashes, loud noises, etc.):

Allergies:

(Please list any that apply: foods, animals, latex, makeup, plants or pollen, etc.)

Food Needs (food cut-up or pureed, gluten free, etc.):

No: Yes: If yes, please explain: _____

Will Need Medication Administered During Event: Yes: No:

* Please note that the church, their staff and volunteers are not responsible for administering medication to guests during the Night to Shine event. If medication is required during the event, a parent or caretaker MUST be available to administer the medication.

Will guest be dropped off and picked up by a parent/caretaker? Yes: No:

Will guest be taking public transportation to and from event? Yes: No:

Will guest be attending as a part of a group that will provide transportation?
Yes: No:

Parent/Caretaker Information

Parent/Caretaker Name(s): _____

Parent/Caretaker Phone: _____

Parent/Caretaker will be... Dropping Guest Off: Enjoying Respite Room:

If enjoying Respite Room, how many? _____

* The Respite Room is a private area where parents/caretakers of guests can spend the evening enjoying food, entertainment and rest while remaining onsite during the event.

Care Provider Agency Information – If Applicable

Care Provider Agency: _____
(If attending as a part of a group, please include agency or company name)

Care Provider Agency Phone: _____

Agency Chaperone (if applicable):

(Note: Chaperone is not required to stay with guest(s) unless required by Care Provider Agency)

Additional Notes or Concerns: _____

Remit form to: Lawrenceville Church of God, 3131 Fox Hollow Road, Springfield Ohio, 45502 or email it to thelcog@gmail.com

If you are a parent or caretaker that will be staying on site (we have a room just for you with food) you must fill this form out. Thanks.

Night to Shine Parent/Caretaker Media & Liability Rights Release

By signing below, and for the good and valuable consideration of participating in an event hosted by Lawrenceville Church of God, and sponsored in part by or associated with the Tim Tebow Foundation, I hereby give my full consent to Tim Tebow Foundation, Inc., ("TTF") a Georgia nonprofit corporation headquartered in Florida and Lawrenceville Church of God, a Ohio nonprofit corporation, to record, by writing, by video, photographic, or audio recording device, or by any other analog or digital means, my actions, physical likeness, biographical information, and/or voice. Additionally, I hereby grant to TTF and Lawrenceville Church of God, without royalty or other compensation now or in the future, all rights of every kind and character whatsoever, in perpetuity, in and to any and all such recordings, along with any additional recordings I might provide to TTF and Lawrenceville Church of God, and to any benefits inuring to TTF and Lawrenceville Church of God as a result of its use of any of the foregoing recordings. Among other things, TTF and Lawrenceville Church of God, but are not required to, copy or reproduce the recording, edit or modify it, incorporate it into another work, display or broadcast it or any of the foregoing privately or publicly, and use or license it or any of the foregoing for use by others, all for the sole benefit and at the sole discretion of TTF and Lawrenceville Church of God, for the advancement of TTF and Lawrenceville Church of God's exempt charitable purposes. All permissions granted herein extend to any successor or assign of TTF and CHURCH and bind me and my heirs, successors, and assigns. I, hereby release and discharge and agree to hold harmless TTF and Lawrenceville Church of God, its directors, officers, employees, volunteers, and independent contractors, from any and all claims or damages, including but not limited to defamation or violation of rights of privacy or publicity, arising from or associated with the recording or use of the recordings. This release shall be construed, interpreted and governed in accordance with the laws of the State of Florida, and should any provision of this release be determined invalid, such invalidity does not affect any of the remaining provisions. I am of full age and have the right to contract in my own name.

AGREED TO AND ACCEPTED:

Parent/Caretaker Information

1. Name of Parent/Caretaker: _____ Date: _____

Signature of Parent/Caretaker: _____

Address: _____ Telephone: _____

City/State/Zip: _____ Email: _____

Participant Information

Name: _____

This form must be signed for every guest in order to attend the Night To Shine Event.
Thank you very much!

Night to Shine Participant Media & Liability Rights Release

By signing below, and for the good and valuable consideration of participating in an event hosted by Lawrenceville Church of God, and sponsored in part by or associated with the Tim Tebow Foundation, I hereby give my full consent to Tim Tebow Foundation, Inc., ("TTF") a Georgia nonprofit corporation headquartered in Florida and Lawrenceville Church of God, a Ohio nonprofit corporation, to record, by writing, by video, photographic, or audio recording device, or by any other analog or digital means, the actions, physical likeness, biographical information, and/or voice of me and/or any person of whom I am the parent or legal guardian, including minor children (collectively referred to as the "Participants"). Additionally, I hereby grant to TTF and Lawrenceville Church of God, without royalty or other compensation now or in the future, all rights of every kind and character whatsoever, in perpetuity, in and to any and all such recordings, along with any additional recordings I might provide to TTF and Lawrenceville Church of God, and to any benefits inuring to TTF and CHURCH as a result of its use of any of the foregoing recordings. Among other things, TTF and Lawrenceville Church of God may, but are not required to, copy or reproduce the recording, edit or modify it, incorporate it into another work, display or broadcast it or any of the foregoing privately or publicly, and use or license it or any of the foregoing for use by others, all for the sole benefit and at the sole discretion of TTF and Lawrenceville Church of God, for the advancement of TTF and Lawrenceville Church of God's exempt charitable purposes. All permissions granted herein extend to any successor or assign of TTF and Lawrenceville Church of God and bind the Participants and their heirs, successors, and assigns. I, on behalf of all Participants, hereby release and discharge and agree to hold harmless TTF and Lawrenceville Church of God, its directors, officers, employees, volunteers, and independent contractors, from any and all claims or damages, including but not limited to defamation or violation of rights of privacy or publicity, arising from or associated with the recording or use of the recordings. This release shall be construed, interpreted and governed in accordance with the laws of the State of Florida, and should any provision of this release be determined invalid, such invalidity does not affect any of the remaining provisions. I am of full age and have the right to contract in my own name and for each Participant.

AGREED TO AND ACCEPTED:

Name of Participant: _____ Date: _____

Signature of Participant (if over age 18): _____

Signature of Parent/Caretaker (if participant is under age 18): _____

Address: _____ Telephone: _____

City/State/Zip: _____ Email: _____

COMMUNICATIONS:

I acknowledge TTF staff members and/or volunteers may contact the Participant to discuss their experience at the event, encourage, pray for, or receive general updates. I hereby give my full consent to TTF to contact the Participant after the event directly through the following means:

_____ Telephone

_____ Text Messages

_____ Email

_____ Please maintain contact through the parent/guardian only

_____ I do not give permission for TTF staff to contact the Participant

Signature of Parent/Caretaker

Date