



# CHILDREN'S PEACE CENTER SITE VISIT AGREEMENT

Please fill out the following information as fully as possible. Mail to Children's PEACE Center, P.O. Box 379, Acworth, GA. 30101 or FAX to 770-974-4602. Call for more information: 770-917-8815 or email [director@childrenspeacecenter.org](mailto:director@childrenspeacecenter.org) [www.childrenspeacecenter.org](http://www.childrenspeacecenter.org)

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ACTIVITY OR ORGANIZATION NAME: \_\_\_\_\_

ADDRESS of ACTIVITY.: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE(S) REQUESTING CPC ON SITE: \_\_\_\_\_

PROGRAM TO BE PRESENTED BY CPC: \_\_\_\_\_

TIMEFRAME OF CPC PROGRAM (List expected start and end times): \_\_\_\_\_

COST AGREED UPON: \_\_\_\_\_ PER CHILD; OR \_\_\_\_\_ FOR PROGRAM: \_\_\_\_\_

OTHER EXPENSES: \_\_\_\_\_

DIRECTIONS AND MILEAGE TO LOCATION (Starting point is Acworth, GA. I-75-attach additional pages if necessary):

SIZE/NUMBER OF ROOMS AND AMOUNT OF SPACE ALLOCATED FOR EXHIBITS:

(One room, hallways only, multiple rooms, dimensions of each?? etc.)

NUMBER OF CHILDREN EXPECTED IN EACH GRADE RANGE (Normally K-5th grades):

K-1st \_\_\_\_\_ 2nd-3rd \_\_\_\_\_ 4th-5th \_\_\_\_\_ Others? \_\_\_\_\_

NUMBER OF VOLUNTEERS YOU WILL SUPPLY? (Must be over 18 yrs old) \_\_\_\_\_

(Minimum is 1 Volunteer per every 4 children, more may be necessary)

TIMEFRAME FOR VOLUNTEER TRAINING...DATE \_\_\_\_\_ TIME \_\_\_\_\_

(Minimum of 60 mins, Maximum of 90 mins)

HAVE CHILDREN BEEN STUDYING PEACE RELATED ISSUES?.....YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, WHAT TYPES OF STUDIES? \_\_\_\_\_

IF NO, DO YOU WISH TO HAVE SOME CURRICULUM PRIOR TO VISIT TO HELP PREPARE THE

CHILDREN FOR THEIR PEACE EXPERIENCE?.....YES \_\_\_\_\_ NO \_\_\_\_\_

IS THIS A RELIGIOUS ACTIVITY OR ORGANIZATION?.....YES \_\_\_\_\_ NO \_\_\_\_\_

Signature of Person Authorizing CPC to be on site during timeframes indicated on this form. This Person also accepts full responsibility for the actions of all volunteers supplied by the requesting organization.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## **LIABILITY RELEASE**

I(We), the undersigned, do acknowledge that although every effort is made to provide a safe, accident-free environment, incidents may occur.

Therefore, I(We) hereby release, forever discharge and agree to hold harmless Andria Melham, the Children's PEACE Center, its parent company and directors, officers, agents, employees and affiliates from any and all liability, claims, or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever which may be incurred by any participating children and/or adults, that occur while they are engaged in the PEACE Center activities and programs on your site/location.

Furthermore, I(We) hereby assume all risk of personal injury, sickness, death, damage and expense, as a result of participation in the activities involved, for all children/adults that are involved in our program, organization or activity which has requested the Children's PEACE Center programs and attendance.

The undersigned further agrees to hold harmless and indemnify the Children's PEACE Center, its parent company and directors, officers, agents, employees and affiliates, for any liability sustained by said organization as the result of negligent, willful or intentional acts of participants, including expenses incurred attendant thereto.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE/AUTHORIZATION: \_\_\_\_\_

(**Note:** Photo Release may be used for each child that participates in the activity or if your class or organization has already signed photo releases, you may use the group release form signed by the authorized person.)

## **GROUP PHOTO RELEASE**

In consideration of the right of all children/adults to participate in this activity, I, \_\_\_\_\_ hereby give my consent and authorize the Children's PEACE Center, its parent company and successors, heirs, legal representatives, assigns and agents to use and reproduce the groups name, voices and/or likeness (photographic, illustrative, audio or video tape, film or electronic and/or digital image), captured on or about \_\_\_\_\_, and circulate and use the same for any and all official resource, use or purpose including but not limited to print, film, or electronic media and reproduction or digital representation of every description, as allowed by law, on the internet/world wide web.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE/AUTHORIZATION: \_\_\_\_\_

## **INDIVIDUAL PHOTO RELEASE**

In consideration of the right of all children/adults to participate in this activity, I, \_\_\_\_\_ hereby give my consent and authorize the Children's PEACE Center, its parent company and successors, heirs, legal representatives, assigns and agents to use and reproduce my name, voice and/or likeness (photographic, illustrative, audio or video tape, film or electronic and/or digital image), captured on or about \_\_\_\_\_, and circulate and use the same for any and all official resource, use or purpose including but not limited to print, film, or electronic media and reproduction or digital representation of every description, as allowed by law, on the internet/world wide web.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE/AUTHORIZATION: \_\_\_\_\_