

Burn Survivors are invited to join the

Alisa Ann Ruch Burn Foundation

for its annual

HOLIDAY PARTY

on Sunday, December 16, 2018

12:30 PM-4:00 PM

Elk's Lodge #1328

1373 E Las Tunas Dr, San Gabriel, CA 91776

Registration is due on
Wednesday, December 12, 2018

www.aarbf.org

First come first served. Up to 3 guests may attend with burn
survivor.

Preregistration is required.



Holiday Party Registration 2018

Name of Burn Survivor (Hospital staff or Volunteer): _____

If the burn survivor is a child, please list the age of the survivor and the parent/guardian's name:

Age (burn survivor) _____ Name of Parent/Guardian _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Cell: (____) _____ - _____

Email address (important): _____

Please list the names of your **immediate** family members who will be joining you. This year the registration will be on a first come first serve basis. Space is limited. We want to make sure that there is enough gifts for the children. *Dial (818) 848-0223 Ext 16 to confirm that we received your registration, or to let us know if there are more than 4 people in your group.*

First & Last Name	Relationship to burn survivor/volunteer/hospital staff	Age (0-17) (Children only)	Gender
1.			
2.			
3.			

Photograph/Video Release

The Alisa Ann Ruch Burn Foundation needs your help and support in its work of providing educational programs about burn injuries. Often, as people become aware of how to prevent burns, they also want to support programs to help survivors of burn accidents. You can help our efforts to increase support for the valuable programs in which you participate. We need your authorization. **Check** next to the appropriate answer and then give your signature.

- Yes, I provide consent for the Alisa Ann Ruch Burn Foundation to use photographs and video of **Holiday Party** for use on the AARBF website, newsletter and Facebook page. I understand that my last name, the cause of burn, and any other sensitive personal information will not be revealed without specific consent.
- No, I do not want to be photographed or videotaped in any way.

Signature (Burn Survivor, Parent/Guardian, Hospital Staff or Volunteer)

Date

Print Full Name

Date



Please Fax, mail or scan (email) by
Wednesday, December 12, 2018

Note: if sending by mail, registration must arrive by 12/12/2018.

Alisa Ann Ruch Burn Foundation, Attention: Margarita Rodriguez
• 50 N. Hill Ave • Suite 305 • Pasadena • CA • 91106 • Fax: (818) 848-0296