Stratford Preparatory Model United Nations Conference

Delegation Participation Form

This form is required for delegate participation in the conference. Failure to submit this form will result in the delegate being ineligible to attend the conference.

Delegate Information

Full Name	
Gender	
Date of Birth	
Street Address	
City, Zip Code	
Phone Number	
Email Address	

Parent/Guardian Information

Full Name	
Street Address	
City, Zip Code	
Phone Number	
Email Address	

Delegation Information

Delegation Name	
Street Address	
City, Zip Code	

Advisor Name	
Phone Number	
Email Address	
Head Delegate Name	
Phone Number	
Email Address	

As a participant of the Stratford Preparatory Blackford Model United Nations Conference, I authorize the Stratford Preparatory Blackford Model United Nations, its secretariat, chairs, staff, and other designees to use the information herein appropriately. I agree to adhere to all state and city laws, as well as all conference policies, and conduct myself in an appropriate manner throughout the duration of the conference. I understand that violation of this agreement may result in expulsion from the conference.

I also grant Stratford Preparatory Blackford Model United Nations permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

Signature: _____ Date: _____

Signature of Parent/Guardian: _____