2015 – 2016 REGISTRATION NA PUA NO'EAU PLEASE PRINT STUDENT INFORMATION Preferred Name: FIRST (LEGAL) MIDDLE INITIALS Date of Birth: / / Are You a U.S. Citizen? Yes D No D If No, a UH WH-1 form is required Gender: Female 🗆 Male 🗆 CITY STATE ZIP CODE + 4DIGIT EXT. ISLAND Grade: Last completed or 2014 - 2015 School Year School Attending: Students Phone: (______ Students E-Mail: ______ Social Networks: _____ (FACEBOOK, TWITTER, Etc.) Student lives with: _____ Other Address: _____ Other Address: _____ STREET/P.O. BOX CITY STATE ZIP CODE Relation to Phone Applicant: (Res): (____) Head of Household Guardian's Name: _____ Phone Phone (Bus) (____) Other: (___) E-mail: _____ Phone Other Relation to Phone (Bus) (In case of an emergency, list two people who you would like us to contact if we are unable to contact you. Contact Name Relation to Child Home Phone Work Phone **Other Phones** 1) 2)

ETHNICITY OF STUDENT: (Please check all that apply. Information collected is for research purposes.)

American/Native	Indian 🛛 A	frican Americ	an/Black	🗖 Cauca	sian/White	Chinese	🗖 Filipino	Native Hawaiian *
🗖 Hispanic/Latino	Japanese	🗖 Korean	Pacific	Islander	🗖 Portugue	ese 🗖 Pue	rto Rican 🛛	Other
 * If Hawaiian please check all that apply: I have personal copies of my child's birth certificates stating specifically that they are of Hawaiian ancestry I have personal records of my child's ancestry in Hawai'i prior to year 1778 								
D My child is in the Office of Hawaiian Affairs' Hawaiian registry								

□ My child is in the Kamehameha Schools' Hawaiian registry

🛛 Besides Nā Pua No'e	au, my child is currently re	eceiving services a	nd/or in programs	specifically set up	for Native Hawaiia	n children
(i.e. Queen Lili'u	okalani Children's Center,	Alu Like, etc.)				

□ Other forms of verifying Hawaiian ancestry (please specify)

ACCIDENT, MEDICAL, FIELD TRIP AND MEDIA RELEASE

I/We the undersigned agree, for ourselves, our heirs, personal representatives and assigns, to hereby release, waive discharge, hold harmless, indemnify, defend and covenant not to sue The Research Corporation of the University of Hawai'i, University of Hawai'i, its Board of Regents, officers, directors, agents and employees including, but not limited to Nā Pua No'eau, all other sponsoring agencies and/or organization's officers, directors, employees, agents and representatives of any and all claims demands, actions, or cause of action, on account of any loss, including damage to personal property, or personal injury or death which may arise out of involvement or participation of my/our child in Nā Pua No'eau programs or activities held during June 1, 2015 to May 31, 2016.

I/we give permission for my/our child to participate in field trip(s) and/or to be transported in a Non-school approved vehicle as deemed necessary and therefore waive also the State's liability. I/we give permission in case of accident or need for medical attention to transport my/our child to a doctor, dentist or emergency medical facility and consent and authorize a medical professional and others working under their supervision to provide medical treatment for any injury or illness arising from or related to his/her participation in this program. I/We understand that The Research Corporation of the University of Hawai'i, University of Hawai'i and/or Nā Pua No'eau does not provide health insurance or otherwise indemnify individuals with respect to injuries or other liabilities arising out of participation further agree to pay any and all medical expenses, costs and other charges arising from or connected with such medical treatment or care.

I/we also hereby give permission to photograph, film, tape, or otherwise record my/our child's name, voice, and/or person and understand that there will be no financial or other remuneration of photographs, news releases, open-circuit (broadcast), closed-circuit, and/or cable television transmission and any other media releases of my/our child to publicize The Research Corporation of the University of Hawai'i, University of Hawai'i and/or Nā Pua No'eau within or outside of the State of Hawai'i in perpetuity either for initial or subsequent transmission or playback.

MEDICAL INFORMATION Please fill out below and datch a copy of your medical card with the subscriber name and membership number of your medical insurance. Subscriber Name:	In accordance with the Jeanne Clery Disclosure of Campus S Hawaiʻi may be viewed on campus websites, or a paper copy mo			
Membership Plan #	Please fill out below and attach a copy of your medic			
MEDICATION List all medication your child is presently taking; Imess				
List all medication your child is presently taking: 			·	
for	List all medication your child is presently taking;		Illnes	SS
for NOTE: Nã Pua No'eau will not dispense any medication to your child, uncluding aspirins and medication. Your child must bring his/her own medication to least during the session. ALLERGES List any allergies or dictary restriction your child may have:				
aven medication in the terry tabled containers. During the program, be sure your child has enough medication to tast during the session. ALLERGIES List any allergies or dietary restriction your child may have: Immunity of the program is the program. The program is the program i				
ALLERGIES List any allergies or dictary restriction your child may have: IMMUNIZATION INFORMATION In what year did your child last receive a: Tetanus Shot? Vaccinations? Tuberculosis Test? RESTRICTIONS/LIMITATIONS Please list any challenges your child has which may prevent him/her from participating in activities: List any activity in which your child cannot participate or you do not want your child to participate: List any activity in which your child cannot participate or you do not want your child to participate: Are there any religious restrictions on what your child can do or be done in an emergency or other health situations? Yes No Indicate your preference concerning your child's swimming ability: My child may NOT swim. Nā Pua No'eau staff may limit my child's participation based on my child's ability to swim and staff judgment of swimming conditions. RESEARCH - Data from applications will be used for program? Yes. No. Is your child (spike for "Prece and Redued Price School Meals? "Pregram? Yes. No. No ou live on (DHIL) Department of Hawaiian Home Lands? Yes. No. No tipe/inportubility of Javarji at Manoa 2400 campus Read OLSCS #4400 Moles #88 No Pue No'eau No ou live on (DHIL) Department of a NB Pua No'eau No Pue No'eau Na Pue No'eau<	NOTE: Nā Pua No'eau will not dispense any medica	tion to your child, in	cluding aspirins and medic	ine. Your child must bring his/her
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http://npn.uhh.hawaii.edunpn@hawaii.edufacebooktwitter>Nā Pua No'eau Kama'i Community College 3-1901 Kaumuali'i Highway Lihu'e, Hawai'i 96766-9591 Phone (808) 241-3238 Fax (808) 245-5042Nā Pua No'eau University of Hawai'i 06822-2205 Phone (808) 956-9240Nā Pua No'eau Moloka'i Education Center P.O. Box 488 Kaunakakai, Hawai'i 96748 Phone (808) 553-9993 Fax (808) 553-9100 Fax (808) 245-5042Nā Pua No'eau Lihu'e, Hawai'i 967263 Phone (808) 956-9240Nā Pua No'eau Phone (808) 553-9993 Fax (808) 553-9100 Fax (808) 555-9100 Fax (808) 565-9100 Fax (808) 565-9100 Fax (808) 956-9240Nā Pua No'eau University of Hawai'i 96763 Phone (808) 553-8108Nā Pua No'eau University of Hawai'i 96763 Phone (808) 565-9100 Fax (808) 565-9100 Fax (808) 565-9100 Fax (808) 956-9240Nā Pua No'eau University of Hawai'i 96720 Phone (808) 553-8108Nā Pua No'eau University of Hawai'i 4 Hilo 200 West Kāwili Street Hilo, Hawai'i 96720-4091 Phone (808) 924-3364 Fax (808) 242-6153Nā Pua No'eau Nā Pua (808) 322-4855Nā Pua No'eau University of Hawai'i at Hilo 200 West Kāwili Street Hilo, Hawai'i 96720-4091 Phone (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678Nā Pua No'eau View Phone (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678Nā Pua Phone (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678 Fax (808) 974-7678	Is your child eligible for "Free and Reduced Price Do you live on (DHHL) Department of Hawaiian	e School Meals" Pr Home Lands?	ogram? □ Yes. □ No. Yes. □ No.	
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Nā Pua No'eau is a program of the University of Hawai'i and is an equal opportunity/affirmative action institution.	University of Hawai'i Maui College 310 Ka'ahumanu Avenue Kahului, Hawai'i 96732-1617 Phone (808) 984-3364 Fax (808) 242-6153	iversity of Hawaiʻi Co 81-964 Halekiʻi Kealakekua, Hawa Phone (808) 322 Fax (808) 322-	nter, West HI University Street 200 W i'i 96750 Hilo, Ha -4867 Phone 4855 Fax (y of Hawai'i at Hilo est Kāwili Street twai'i 96720-4091 (808) 974-7678 808) 974-7681

Mahalo, to the Office of Hawaiian Affairs for funding Nā Pua No'eau Programs.