## 2023 Huaka'i I Kanaloa-Kaho'olawe Protect Kaho'olawe 'Ohana (PKO) REGISTRATION FORM **FOR ACCESS DATES OF:**

NAME*			GROUP N	IAME .		
MAILING AI	DDRESS *					
E-MAIL * _						
PHONE *			BIRTH DATE (MM/DD/YYYY			
	IBER OF EMERG aloa-Kahoʻolawe		Т			
FOOD/DRU	G/OTHER ALLE	RGIES/RESTRI	CTIONS _			<del></del>
CURRENT P	HYSICAL LIMIT	ATIONS				
<u>CERTIFICAT</u>	<u>ΓΙΟΝS (</u> please cir	cle all that appl	v)			
FIRST AID WOFR	CPR ACLS	LIFEGUARD/WATER SAFETY OTHERATLS HAZMAT OTHER				
			Huakaʻi fe	es are s	ubject to change.	ous transportation, round-trip boat Please check with your huaka'i
			<mark>\$</mark> 160	) (6 to	12 years old)	
		<b>\$1</b> (	00 (5 year	rs old a	and younger)	
	DONATION to	PROTECT KA	HOʻOLAV	VE 'OH	IANA (PKO)	
T-SHIRT - \$	320 (optional)	(circle one) S	M L	XL	<b>XXL</b> (add \$2)	\$
TOTAL AM	OUNT ENCLOSE	D ( <mark>Huaka'i Cost l</mark>	<mark>Due:</mark>		\$	

Please complete and return this PKO Registration Form & PKO Release of Liability Agreement, the KIRC Volunteer Agreement, a to the Access Coordinator - Davianna McGregor davianna.mcgregor@gmail.com

I would like to be put on a mailing list to receive the Protect Kahoʻolawe ʻOhana newsletter in the future. YES NO

## **MEDIA RELEASE**

I hereby grant PKO my permission to photograph or videotape my or my child's participation as a volunteer and to use those images in any education or outreach activity (i.e. brochures, videos, displays, etc.) \_\_\_ YES

<sup>\*</sup>Contact info is collected above for use before and during access for communication and health & safety purposes only. Please feel free to sign-up at anyone of the following Protect Kaho'olawe 'Ohana networks: http://www.protectkahoolaweohana.org/; Facebook; IG.

## **GRANT INFORMATION**

Providing this information will assist the Protect Kahoʻolawe ʻOhana/Fund in collecting data that assists in fulfilling grant requirements.

I am Hawaiian (directly descended from inhabitants of what is now known as the Hawaiian Islands prior to 1778). \_\_\_YES \_\_\_NO