

FY12 SUPPLEMENTAL ACTIVITY REGISTRATION FORM

For participants in the Collins Woodworkers Guild

Name: _____ Ext. _____ Mail Drop: _____

Email Address: _____

Home E mail _____

Home Address: _____

Activity:
Collins Woodworkers Guild

Activity Coordinator:
Ray Collins 130-110

Make check payable to:
Collins Woodworkers Guild

Participation fee: \$15.00
Cash/Check, Check # _____
(circle one)

Status: _____
(E = employee, S = spouse, R = retiree, C = contract)

Division: _____
(ATS, BRS, GS, OPS, EBis, CS)

Release;

I understand that the above named activity is sponsored for recreational purposes only. I also understand the nature of the activity including its possible risks and voluntarily register for participation.

I hereby release Rockwell Collins, Inc. from any claims, demands or damages because of injury or death, other than customary and reasonable medical expenses under the existing company medical plan, resulting in any way from participation in this activity.

Signature Date

**Subsidized participants are defined as current employees, retired employees, Contract Employees, and spouses of the above. Inclusion of non-subsidized participants will be subject to each individual program's concurrence.

FOR OFFICE USE ONLY

Office Signature: _____ Date: _____

Subsidized Participant: @ \$ _____ Non-subsidized Participant @\$ _____

Invoice # _____