



NOMINATION FORM

Adventure Is Out There is an experiential program of the Bray Foundation. Our mission is to advance the education and training of new adoption families while focusing on increasing the welfare of family relationships through Disney and other nurturing experiences that encourage family bonding.

CHOOSE YOUR OWN ADVENTURE GIVEAWAY:

Adventure Is Out There (AIOT) is excited to announce that we have opened nominations for our all-new “Choose Your Own Adventure” giveaway! These family adventures have been chosen for their COVID friendly nature with a focus on participation from your household family members. Please check out Page 2 for the exciting adventure offerings.

On October 4, 2020, AIOT will be awarding up to 3 first-time adoption families with their choice of a family adventure worth up to \$500 in items and opportunities to create new memories! Additional products and/or services over the \$500 award will be at the family’s expense so plan accordingly. Simply complete this nomination form, **send it in by 11:59pm September 30, 2020** and AIOT will reach out to the winning families shortly thereafter.

Final award details and purchasing logistics will be provided as your chosen adventure dates get closer. AIOT will work with each family to purchase the chosen adventure package on their behalf. The adventure must be utilized by January 31, 2021 along with the family adventure photos shared with AIOT (see item “h” below in family qualifications). Please make sure work schedules and child(s) school allow for time off without interference during the selected adventure dates. We can’t wait to see what trip ideas everyone comes up with!

FAMILY QUALIFICATIONS:

- a. Parents of the adopted individual(s) are the only people who can nominate their families.
- b. Families must be new, first time adoptive parent(s) having never adopted before.
- c. Families must have legally adopted individual and have spent a minimum 1+ years together. (can include foster years)
- d. The adopted individual/s must not be over 18 years old.
- e. Families have not been awarded an experience with AIOT or any other wish granting organizations previously.
- f. Families must supply a copy of both a court order and birth certificate for each adopted individual. No exceptions.
- g. A recent family photo is required so please provide at least 2+ photos with your submission.
- h. Families must take photos and/or videos during their adventure to share with AIOT for our marketing needs.
- i. The adventure must be completed between October 4, 2020 through January 31, 2021.
- j. Please be advised, AIOT does not provide medical expenses/assistance for existing conditions during this experience. It will be the sole responsibility of the families to fulfill this need.

FORM INSTRUCTIONS:

Families must meet specific criteria and fill out the required form(s) in order to qualify. Open enrollment for this trip will end **11:59pm September 30, 2020**. Please be sure to scan in your completed pages and then email to **info@adventure.ngo** by this time. Your submission must contain ALL the forms included here in order to be accepted, including the above mentioned copies of the court order and birth certificate documents. Please submit ALL documents together at the same time to facilitate and expedite the submission process. You will receive a confirmation email to confirm receipt of your application. If you have any questions please use the CONTACT US form on the website.



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SELECT ONE OF THE FOLLOWING ADVENTURE OPTIONS (ADD A CHECK MARK IN THE BOX):

- #1 CAMPING ADVENTURE includes:**
 - \$80 annual America the Beautiful Park Pass
 - \$120 Fuel, Food and Drinks
 - \$300 Dick's Sporting Goods/Academy gift card (use as a contribution for a tent and/or supplies)

- #2 RV CAMPING ADVENTURE includes:**
 - \$80 annual America the Beautiful Park Pass
 - \$120 Fuel, Food and Drinks
 - \$300 RV Rental contribution (you choose who to rent from)

- #3 HOTEL STAY includes:**
 - \$300 contribution for Lodging in or out of town
 - \$100 for Fuel, Food and Drinks
 - \$100 for Entertainment (ie: Museums, Science Centers, Aquariums, Zoos, Performing Arts, etc.)

- #4 FUN FAMILY ACTIVITY/LESSON includes:**

Up to \$500 contribution towards an exciting family activity/lesson of your choice (ie: riding horses, skiing, archery, rafting, etc.) If choosing this Adventure, list your chosen activity/lesson: _____

- #5 PROFESSIONAL FAMILY PHOTO SESSION includes:**
 - Up to \$500 contribution for a professional photographer
 - You choose the professional photographer that works best for your family.

- #6 BACKYARD CAMPING includes:**
 - \$100 Food and Drink
 - \$400 Dick's Sporting Goods/Academy gift card (use as a contribution for a tent and/or supplies)



NOMINATION FORM CONT.

Read & fill out completely | Print clearly & legibly

1) Marketing Questions:

- a. How did you find out about AIOT? _____

- b. What are future experiences you think AIOT should offer? _____

2) Adopted Individual #1 Information:

- a. What is the individuals full legal adopted name? _____
- b. Gender? _____ c. Age? _____ d. Date of Birth? (mm/dd/yyyy) _____ e. Grade level? _____

3) Adopted Individual #2 Information: *(applicable if 2nd child was adopted at the same time as Individual #1)*

- a. What is the individuals full legal adopted name? _____
- b. Gender? _____ c. Age? _____ d. Date of Birth? (mm/dd/yyyy) _____ e. Grade level? _____

4) Parent Information: *(filled out by individual completing the application and will be the primary point of contact)*

- a) What is your full legal name? _____
- b) What is your relationship to the individual? _____ Mother _____ Father _____ Other _____
If other, please explain: _____

- c) What is your date of birth? (mm/dd/yyyy) _____
- d) What is your complete home address? _____

- e) What is the best email address to contact you? _____
- f) Home phone number? _____ g) Cell phone number? _____



NOMINATION FORM CONT.

Read & fill out completely | Print clearly & legibly

5) Family Information: *(not all may be applicable)*

Including yourself, please provide the full legal name, age, date of birth, and relationship of each of your household family members to the adopted individual(s).

Full Name	Age	Date of Birth	Relationship to Adopted Individual(s)
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

6) General Information:

a. What is the family’s primary spoken language? _____

b. Is your family in good health and physical condition for your chosen experience? ____ Yes ____ No

If no, please explain: _____

c. AIOT’s marketing team needs to share photos/videos of your chosen adventure once completed. Do you foresee any problems with taking photos/videos of your adventure or AIOT using them publicly? ____ Yes ____ No

If yes, please explain in detail: _____

d. How many months/years has the adopted individual(s) been with your family? *Include fostered years.* _____

e. What was the official date your adopted individual(s) joined your family? _____

f. Has the adopted individual(s) ever received a trip from AIOT or any other wish granting organizations? ____ Yes ____ No

If yes, which organization and when: _____



NOMINATION FORM CONT.

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g. Has this adopted individual(s) ever visited the destination/experience being awarded? ____ Yes ____ No

h. Have any family members visited the destination/experience being awarded? ____ Yes ____ No

i. Including your adopted individual(s), has your family vacationed together before? ____ Yes ____ No

If yes, where and when: _____

j. Have you submitted an application with AIOT before? ____ Yes ____ No

If yes, when: _____

k. Based on the AIOT experience your family is nominating itself for, are you applying with any other wish granting organizations for a similar event? ____ Yes ____ No

If yes, please explain which organization and how long your family has been listed: _____

l. Would this experience be possible without the help of AIOT? ____ Yes ____ No

Please explain: _____

m. If selected, would AIOT be able to use your adoption story to help fund raise for this and future trips? ____ Yes ____ No

If no, please explain: _____

n. Is anyone in your family involved in litigation? ____ Yes ____ No

If yes, please explain in detail: _____



NOMINATION FORM CONT.

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7) Reference Forms: *(Refer to the 2 REFERENCE FORMS on pages 7 and 8)*

A total of 2 family member/friend references will be required and used as an evaluation tool. This is SPECIFICALLY REQUIRED. We recommend letting those family members/friends chosen to know what adventure you have picked so they can provide appropriate details. Please include the forms with the other pages here upon submission. DO NOT submit separate from the other documents or you run the risk they may be misplaced.

8) Release

I represent that the information provided is true and accurate and acknowledge that it is being relied upon and may be investigated, including, but not limited to any criminal background or reference checks. I hereby authorize the release of such information without liability to Adventure Is Out There, its affiliates and subsidiaries, and their respective officers, directors, employees, or agents ("Releasees"). I HEREBY WAIVE, RELEASE AND DISCHARGE RELEASEES FROM ANY LIABILITY ARISING FROM THE RELEASE OF SUCH INFORMATION, INCLUDING ANY LIABILITY THAT MAY ARISE FROM A NEGLIGENT ACT OR OMISSION OF RELEASEES. I further acknowledge that Releasees operate a website or may engage in other marketing and public awareness activities that may include the use of my image or likeness. I hereby perpetually convey, transfer and assign all right, title and interest to Releasees in and to any images, text, quotes, comments, endorsements, videos, likeness, film, audio, audio-visual, graphic or verbal depictions of any kind of me while involved in any activities with Releasees (the "Content") without any consideration to me of any kind. The Content, including the copyright and all other rights therein, shall be Releasees' sole and exclusive property and I hereby grant and assign all rights of any nature in and to the Content. I agree that the Content may be combined with other images, text, graphics, and film audio and audio-visual works; and may be cropped, altered or modified. I acknowledge that the experiences offered and travel comes with its own inherent risks and that should I be selected to participate in Releasees' activities, I accept that there are certain risks associated with such participation. I, HEREBY FOREVER AND UNCONDITIONALLY WAIVE AND RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS Releasees from and against any and all claims, liability and/or causes of actions I may have or that may be made on my behalf or by my spouse, children, heirs and legal representatives, for death, wrongful death, personal injury (whether physical, emotional and/or psychiatric or any combination thereof), loss of consortium, property damage and/or breach of contract or any other damage, occasioned by, arising out of or incidental to my participation in the activities or services provided by Releasees WHETHER OR NOT RESULTING FROM OR CAUSED BY THE NEGLIGENCE OF AND/OR THE PART OF RELEASEES.

Parent Name: _____

Date: _____

Parent Signature: _____



REFERENCE FORM #1 - FAMILY MEMBER/FRIEND

*This form is to be filled out by the **FAMILY MEMBER OR FRIEND** providing the family's reference.
Read & fill out completely | Print clearly & legibly*

Reference: *(Please be advised that all references will be authenticated by AIOT.)*

a. Referrer First and Last Name: _____ b. Phone Number: _____

c. Email: _____ d. Family you are Referring: _____

e. Relationship to Family: _____

f. Please explain why an experience like this would be positive and contribute to the well being of the family.

g. Reference Summary: *(Please explain why the family is a good candidate for this experience and how they will benefit from it.)* _____

Referrer Name: _____ Referrer Signature: _____

By signing this document, you certify that all statements provided here are true and correct to the best of your knowledge and grant us permission to contact you, if needed.



REFERENCE FORM #2 - FAMILY MEMBER/FRIEND

*This form is to be filled out by the **FAMILY MEMBER OR FRIEND** providing the family's reference.
Read & fill out completely | Print clearly & legibly*

Reference: *(Please be advised that all references will be authenticated by AIOT.)*

a. Referrer First and Last Name: _____ b. Phone Number: _____

c. Email: _____ d. Family you are Referring: _____

e. Relationship to Family: _____

f. Please explain why an experience like this would be positive and contribute to the well being of the family.

g. Reference Summary: *(Please explain why the family is a good candidate for this experience and how they will benefit from it.)* _____

Referrer Name: _____ Referrer Signature: _____

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