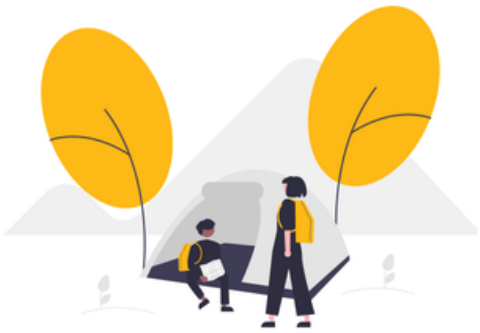
Online Participation Agreement and Waiver Form

Participant Information



Name

Phone Number

Email

Address

Age

Date of Birth

Parent/Legal Guardian Information

Name

Relationship

Phone Number

Email

Address

Program Information

Program Name

Program Date

Program Location

Program Time

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Acknowledgment

I release the organizers from any liabilities, loss, damage, and fees during the program or while on the premise.

I indemnify and hold them harmless from any injuries, demands, or death that may be sustained by my child.

I accept the risks that are associated with my child when we/I decided to allow him/her to participate.

I authorize the organizers to take photos and videos of my child during the program and while on the premise. I allow them to use this for educational, advertising, and marketing purposes provided that they value our privacy with respect and will not associate it with unpleasant situations.

I acknowledge that my child is in good mental and good physical condition.

I am the parent/legal guardian of the participant, I am fully competent and I am above 18 years of age.

I have read and understand the waiver agreement above and by signing this document, I hereby agree and confirm that I will abide by it.

Signature of Parent/Legal Guardian

Date Signed

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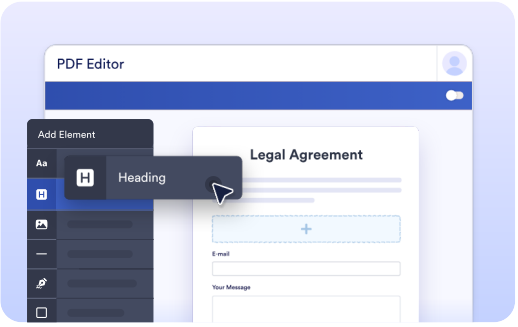

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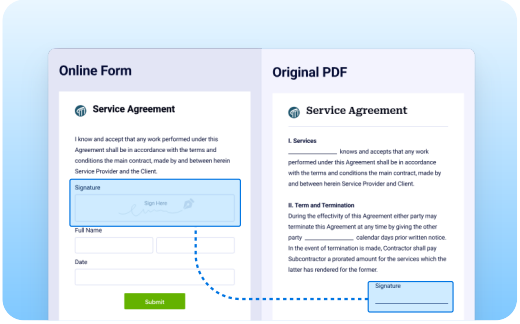

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