



MINOR WAIVER FORM

1. I, the undersigned, hereby Release and agree to Hold Harmless Easterseals Delaware & Maryland's Eastern Shore and their representatives individually and collectively, from and against any claims, demands and/or liabilities for any injuries, harm, loss, inconvenience or other damages resulting from my participation in the Volleyball Challenge. I have been advised of and acknowledge the risks involved in this activity and I will conduct myself in a safe and prudent manner while participating. I hereby consent to and authorize emergency treatment in the event of injury or illness while participating in the activity.
2. I consent to use of my name and any photographs taken of me during the activity in any promotional materials or publications.
3. I agree to keep all or any privileged information confidential.

I CERTIFY THAT I HAVE READ THE RELEASE AND WAIVER AND UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Signature

Date

Print Name

Under 18 (circle one): Yes No

Signature of Parent of Guardian

Date

Parent or Guardian Print Name

Date