Kids Fitness Festival of the Palm Beaches

Waiver Form

CAMP NAME (if registering with	a group/summer camp)		
PARTICIPANT INFORMATION	ON		
First Name:	Last Name:_		M.I
Date of Birth:	Age:		
Address:			
City:		State:	Zip:
Phone:	E-mail:		
Event Date: Wednesday, July 9, 10:00	a.m. to 2:30 p.m.		
Festival, including but not limited to cuts at particular rules, equipment, and personal di 2. PARTICIPANT KNOWINGLY AND FRE THE RELEASEES or others, and assume ft 3. PARTICIPANT willingly agrees to comply significant hazard during his/her presence at immediately to the attention of the nearest of the PARTICIPANT acknowledges that photographis/her appearance in any photograph and/of materials. PARTICIPANT hereby waives at PBCSC in future printed materials and vide 5. PARTICIPANT, his/her heirs, assigns, person employees, other participants, sponsoring as	the Festival, PARTICIPANT acknowledges that bruising, sprains, strains, bone fractures, heat scipline may reduce this risk, PARTICIPANT acknowledges that bruising, sprains, strains, bone fractures, heat scipline may reduce this risk, PARTICIPANT actions and responsibility for PARTICIPANT'S actions with the stated and customary terms and conditudor participation, PARTICIPANT shall remove the following participation, PARTICIPANT shall remove the following participation will be taken at the Festival application. Photographs and/or video may be usen youngensation for the use of their photograph on in recorded materials. Considered the following properties, sponsors, advertisers, and if applicable, DISABILITY, DEATH, or loss of damage to perform the following properties of the following properties and participants. ITY AND ASSUMPTION OF RISK AGREEM BY SIGNING IT, AND SIGN IT FREELY ACT AND SIGNIT FREELY ACT AND SIG	e risk for potential injuries was and neck injuries, blunt traagrees that said risks remain. own and unknown. EVEN II and conduct. Stions for participation. In the overhimself/herself from participation and PARTICIPANT, by their and PARTICIPANT, by their and PARTICIPANT, by their and by the Palm Beach County she and/or video and consents and HOLD HARMLESS owners and lessors of premiserson or property, WHETHE MENT. FULLY UNDERSTAIND VOLUNTARILY WITH Age: Date STRATION) Insent and agree to his/her release the Releasees from any and	hich may be sustained during participation in the auma, permanent paralysis and/or death. While F ARISING FROM THE NEGLIGENCE OF the event PARTICIPANT observes any unusual cipation and bring the abovementioned hazard or or their parent/guardian signature, consents to a Sports Commission ("PBCSC") as promotional is to the use of such photographs and/or video by PBCSC, their officers, officials, agents and/or the used to conduct the event ("Releasees"), WITH ER ARISING FROM THE NEGLIGENCE OF AND ITS TERMS, UNDERSTAND THAT I HOUT ANY INDUCEMENT. There: The ease as provided above of all the Releases, and, and all liabilities incident to my minor child's
permitted by law. Parent/Gaurdian Signature:		Emergency	Contact Number:

Parent/Gaurdian Name (Please Print)