

**RELEASE AND WAIVER OF LIABILITY**

I ASSUME ALL OF THE RISKS OF PARTICIPATING at Kids ‘n Kinship events and activities, whether such risks may or may not be foreseen. These risks include, by way of example and not limitation, dangers of bodily injury, property damage or death. These injuries and damages may arise from natural causes, negligence or unintentional acts of Kid ‘n Kinship, its directors, officers, employees, agents or volunteers (“Releasee”), negligence or unintentional acts of myself or other participants or otherwise. I understand these risks may be involved in Kids ‘n Kinship activities and that there may or may not be medical rescue or expertise needed to deal with the risks to which I may be exposed.

I WAIVE, RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Releasee from all liability for any loss or damage, and any claim or demands therefor, whether caused by the negligence or unintentional acts of the Releasee, myself or other participants or otherwise while engaging in Kids ‘n Kinship events and activities.

I AGREE TO INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the Releasee from any loss, liability, damage or cost incurred from participating in Kids ‘n Kinship events and activities whether caused by the negligence or unintentional acts of the Releasee, myself or other participants or otherwise.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND FULLY UNDERSTAND ITS CONTENT, AND I AM AGREEING TO ITS TERMS FREELY AND VOLUNTARILY. UPON SIGNING THIS DOCUMENT, I ASSUME ALL RISKS OF INJURY OR DAMAGE AND AGREE TO PARTICIPATE IN THIS ACTIVITY.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**FOR MINORS:**

I represent that I am the parent and/or guardian of \_\_\_\_\_  
\_\_\_\_\_ (list all participants under the age of 18). I consent to the previously-named minor(s)’s participation in Kids ‘n Kinship activities or events, and I agree, on behalf of the minor(s), to all of the terms of the release and waiver of liability set forth above.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**MEDIA RELEASE**

I also grant consent for **photos, video, quotes and names** of myself and those of my child(ren) or minors under my care, if they are volunteering or participating in a Kids ‘n Kinship event to be used in publications, internet web sites, social media sites, etc. to promote the Kids ‘n Kinship program, during and after our time as participants with the program. I further understand that I will not be financially compensated for their use, nor will I be able to preview them prior to use.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name