Kids Fitness Festival of the Palm Beaches

Waiver Form

CAMP NAME (if registering with a group/summer camp)		
PARTICIPANT INFORMATION		
First Name:	Last Name:	M.I
Date of Birth:	Age:	
Address:		
City:	State:	Zip:
Phone:	E-mail:	
Date Attending (Please check one):	Wednesday, July 15, 2020	Thursday, July 16, 2020
Waiver of L	Liability and Statement of Fitness (read befo	re signing)
foregoing: 1. Due to the nature of the activities offered at the Festi Festival, including but not limited to cuts and bruising, particular rules, equipment, and personal discipline may 2. PARTICIPANT KNOWINGLY AND FREELY ASS THE RELEASEES or others, and assume full responsib 3. PARTICIPANT willingly agrees to comply with the significant hazard during his/her presence and/or partici immediately to the attention of the nearest authorized r 4. PARTICIPANT acknowledges that photographs and his/her appearance in any photograph and/or video. Photographs and the participant in the properties of the participant in the properties of the presence of the presence and properties. PARTICIPANT hereby waives any compension of the presence of the participants, assigns, personal representations, other participants, sponsoring agencies, sponsoring agenc	stated and customary terms and conditions for participation. In ipation, PARTICIPANT shall remove himself/herself from particepresentative of the Festival. I/or video will be taken at the Festival and PARTICIPANT, by the notographs and/or video may be used by the Palm Beach Countration for the use of their photographs and/or video and consented materials. It is essentatives and next of kin, RELEASE AND HOLD HARMLE. Insors, advertisers, and if applicable, owners and lessors of premisery, DEATH, or loss of damage to person or property, WHETHE	d acknowledges, agrees, and consents to the swhich may be sustained during participation in the auma, permanent paralysis and/or death. While I IF ARISING FROM THE NEGLIGENCE OF a the event PARTICIPANT observes any unusual cipation and bring the abovementioned hazard their or their parent/guardian signature, consents to by Sports Commission ("PBCSC") as promotional is to the use of such photographs and/or video by SS PBCSC, their officers, officials, agents and/or sees used to conduct the event ("Releasees"), WITH ER ARISING FROM THE NEGLIGENCE OF
AGREEMEN I. FULLY UNDERSTAND ITS TERMS FREELY AND VOLUNTARILY WITHOUT ANY IN	NDUCEMENT.	
Signature:	Age:	Date:
for myself, my heirs, assigns, and next of kin. I release a	ER AGE 18 AT THE TIME OF REGISTRATION) esponsibility for this participants, do consent and agree to his/he and agree to indemnify and hold harmless the Releasees from any ided above, EVEN IF ARISING FROM THE NEGLIGENCE	y and all liabilities incident to my minor child's
Parent/Gaurdian Signature:	Emergen	cy Contact Number:
Parent/Gaurdian Name (Please Print) First	Last	Date: