



## Waiver and Release of Liability

I, the undersigned, am a person at least 18 years of age. I am the parent or guardian of \_\_\_\_\_ . I consent to their voluntarily participation in Aglow International's \_\_\_\_\_ event/meeting on \_\_\_\_\_ .

I, \_\_\_\_\_, hereby assume all responsibility and risks that may result to the minor(s) listed on this form from the group/event. In connection with my participation in the Program. I agree to indemnify and defend Aglow International against all claims, or damages which may arise from the below listed child's use of or presence at Aglow International's Generations event/meeting.

**Photo Release:** I grant and convey to Aglow International all right, title, and interests in any and all photographs, images, video, or audio recordings of my child (listed minor), their likeness or voice recorded by Aglow International at this event/meeting.

**Name of Minor Child:** \_\_\_\_\_

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**Medical Authorization:** In the event of an injury to the above minor during the above described activities, I give my permission for Aglow International to arrange for any necessary medical treatment or care for which I shall be financially responsible, in the event that I am not present or available at the time of the emergency. This temporary authority will be given for the date(s) of the event only and Aglow International will have my consent to:

1. Seek appropriate medical treatment or attention on behalf of my child as may be required by the circumstances, including without limitation, that of a licensed medical physical and/or a hospital.
2. Authorize medical treatment or medical procedures in an emergency situation in which the parent/guardian are not available to make such decisions in a life-threatening situation.

By signing below, I represent that I am the parent or guardian – and if divorced that I have custody- of the above-named minor. I have carefully read this Waiver and Release of Liability. By my signature, I am stating that I understand, agree to, and accept all of its provisions, and understand that I am giving away substantial legal rights for both myself and for my child.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date