

Child Activity Waiver

This Waiver and Release of Liability is executed by the undersigned Parent/Legal Guardian on behalf of the minor child named below in connection with participation in the specified activity.

Assumption of Risk

I acknowledge that participation in the activity involves certain inherent risks. I confirm that my child is in good health and fit to participate. I voluntarily assume any and all risks, whether known or unknown, associated with the activity.

Release and Waiver

In consideration of my child being allowed to participate, I hereby release and hold harmless the organizers, event leaders, staff, volunteers, and affiliates from any and all liability for injury, loss, or damage to person or property that may arise from participation.

Medical Authorization

In case of emergency, I authorize medical treatment for my child and agree to be responsible for any associated costs.

General Provisions

I have read, understood, and voluntarily sign this waiver. I understand that by signing, I give up legal rights for claims on my child's and my behalf.

Child's Name

Age

Date of Birth

Parent/Guardian Name

Contact Number

Activity/Event Name

Date

Parent/Guardian Signature

Date
