

Youth Workshop Parental Consent and Waiver

Participant Information

Participant Name: _____

Age: _____

Date of Birth: _____

Parent/Guardian Name: _____

Phone Number: _____

Email Address: _____

Emergency Contact Name & Phone: _____

Consent & Waiver

I, the undersigned parent or legal guardian of the above-named minor ("Participant"), hereby give my consent for my child to participate in the Youth Workshop organized by _____. I acknowledge that participation in the workshop may involve physical activity and inherent risks. I voluntarily assume all such risks and agree to release, indemnify, and hold harmless the organizers, staff, and volunteers from any and all liability, claims, or demands for injuries, losses, or damages arising from or related to participation.

In case of emergency, I authorize the organizers to seek medical treatment for my child as needed.

Parent/Guardian Signature: _____

Date: _____

If you have any questions regarding this form or workshop details, please contact: _____