

Group Name _ Name (PRINT)

In Emergency, notify: ___

Number and Street

____ (W) ___

GUEST GROUP LIABILITY RELEASE FORM – ADULT

_____ (C) _____

THIS FORM IS NULL AND VOID IF ALTERED

Please use this form if 18 years old or older.

If under 18 years old, please fill out Liability Release Form—Minor

AUTHORIZATION AND LIABILITY RELEASE AGREEMENT

_____ Housing Assigned (Office Use Only)

City and State

Phone _

Middle Initial

Zip

| PRINT Full Name | |
|--|---|
| Signature of Participant | Date |
| I REPRESENT THAT ALL INFORMATION I HAVE PROVIDED IS COMPLIALL OF THE FOREGOING, FULLY UNDERSTAND THE TERMS OF EACH SUBSTANTIAL RIGHTS BY MY SIGNING THIS FORM AND AGREEING TO THESE TERMS FREELY AND VOLUNTARILY AND WITHOUT INDUCEMENT | I, UNDERSTAND THAT I HAVE GIVEN UP O THESE TERMS, AND AGREE TO |
| RESPONSIBILITY TO KEEP PVBCC INFORMED: If any of the information I have provided on this form changes, I agree to promptly infimmediately inform PVBCC if I have been exposed to any communicable diseases. | |
| PHOTO/VIDEO CONSENT AND RELEASE: I hereby assign and grant Releasees the right and permission to use, display, and publish photographs, video, electronic representations, and sound recordings made of me during Activities, and I hereby RELEASE Releasees from any and all liability from such use and publication. I specifically WAIVE all rights to compensation and approval for any of the foregoing. | |
| SCOPE: I further acknowledge and accept that this Agreement is intended to be as bruthat if any portion of this Agreement is deemed to be invalid, the remainder will continue. | |
| I HEREBY RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS, to from any and all liability, claims, demands, costs, expenses and compensation arising other damage that may result to myself or to members of my family, household, or ind responsible while participating in or present at any of the Activities, WHETHER ARIRELEASEES OR OTHERWISE. | out of or in any way related to any injury or lividuals I invite or for whom I am otherwise |
| DISCLAIMER, ASSUMPTION OF RISK AND WAIVER: I acknowledge that pa myself and may result in various types of injury including, but not limited to, sickness, injury, property damage and financial damage. I VOLUNTARILY ASSUME ALL S AND UNKNOWN, OF INJURIES, HOWEVER CAUSED, EVEN IF CAUSED IN INACTION, OR NEGLIGENCE OF PVBCC AND ITS AGENTS, EMPLOYEES DIRECTORS, MEMBERS, AND OTHER REPRESENTATIVES ("RELEASEE LAW. | , bodily injury, death, emotional injury, personal SUCH RISKS, INCLUDING RISKS KNOWN N WHOLE OR IN PART BY THE ACTION, S, VOLUNTEERS, OFFICERS, |
| Participation in any PVBCC activities can be physically and mentally intense. I will c observe any unusual or unnecessary hazard during my participation, I will bring such t practical. | |
| I, the undersigned ("Participant"), hereby enter into this authorization and liability rele IN CONSIDERATION OF being able to participate in any PVBCC-related activities (limited to, those occurring at PVBCC facilities, and transportation to and from each ac | ("Activities"). Activities include, but are not |