



**Personal Responsibility In a Desirable Environment**

**AGREEMENT TO PARTICIPATE RELEASE & WAIVER FORM**

I/we, the undersigned, parent(s)/guardian(s) of \_\_\_\_\_ (name of minor), a minor under the age of eighteen (18), do hereby grant for said minor to participate in the cooperating agencies' cleanup activities sponsored by Eastern Kentucky PRIDE, Inc., and other sponsors, and in consideration of said minor being allowed to participate in the activity and recognizing that this program will involve activities which because of their close proximity to water are inherently dangerous, I/we, intending to be legally bound hereby, for myself/ourselves, my/our heirs, executors and administrators, voluntarily assume all risks of accident or injury said minor and release and forever discharge PRIDE and other sponsors and their respective employees, officers and agents from any and all liability for personal injury or property damage of any kind sustained in association with participation in the program, whether such personal injury or property damage is caused by the negligence of PRIDE and other sponsors, their respective employees, officers, or agents, or otherwise.

I covenant and agree to indemnify and hold harmless PRIDE and other sponsors, PRIDE, their respective employees, officers, and agents, from any liability, loss and expense, including but not limited to damages, legal expenses and cost of defense, in any matter arising from my participation in PRIDE cleanup activities.

As used herein, "Agents" shall include local area coordinators and other volunteers working on behalf of PRIDE and any other event sponsors.

I/we further agree that said minor will abide by all applicable rules and regulations promulgated by PRIDE and will follow instructions by all supervisors and/or instructors who are connected with this program.

\_\_\_\_\_  
PARTICIPANT (Signature)

\_\_\_\_\_  
PARENT/GUARDIAN

\_\_\_\_\_  
PARENT/GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

\_\_\_\_\_ Check here if on medication or if health problems may affect participation in the cleanup activity. A site Coordinator must speak with you if this paragraph is checked.

I am a competent swimmer: Yes \_\_\_\_\_ No \_\_\_\_\_