



WAIVER AND RELEASE

I fully understand that participating in activities at the Rotary Youth Leadership Awards Conference, hereinafter "Conference", may result in accidents, illness, or serious injury. I am voluntarily allowing my student to participate in the conference with complete understanding of the risks associated with participation in the conference.

I further acknowledge that this conference requires participants to be in proper physical condition. By signing this Waiver and Release Form, I declare that my student is medically able, physically fit, and capable of participating in the conference.

In consideration for my student being allowed to participate in the conference, we agree to release and hold harmless the premises owner and the conference's sponsors, including Rotary District 7505, the Rotary Club sponsors, its affiliates, agents, and employees, from all liability for any injuries and/or illnesses sustained by my student, which may directly or indirectly result from my student's conduct or from the negligence of other participants in the conference, and/or from the negligence of the premises owner or the negligence of the sponsors of the conference, including Rotary District 7505, the Rotary Club sponsors, its affiliates, agents, and employees .

I also acknowledge full and sole responsibility for any and all medical expenses that my student may incur as a result of any injury and/or illness that occurs as a result of my student's participation in the conference. I understand and agree that this Waiver and Release is binding upon my student and myself.

I hereby grant my consent and permission to Rotary District 7505, the Rotary Club sponsors, its affiliates, agents, and employees, to use my student's name, photograph, videotape, motion picture recording, voice, or likeness for Rotary purposes, including pre and post conference publicity. I also hereby grant permission for the Rotary Conference Program Manager, Event Coordinator, and/or counselors, and the sponsoring Rotary Club to contact my student by email or phone before and after the Conference for the purpose of promoting and gathering input, comments, suggestions to further promote and improve the RYLA program and/or Rotary.

I have carefully read this Waiver and Release and fully understand its contents. On behalf of myself and my student, I consent and agree to the terms of this Waiver and Release and, by my signature below, authorize my student's participation subject to those terms.

X _____
Signature of Student's Parent or Legal Guardian

Date

Print Name of Student's Parent or Legal Guardian

X _____
Signature of Participant

Date

Print Name of Participant