PARTICIPANT AGREEMENT, WAIVER AND RELEASE FORM

THIS FORM MUST BE COMPLETED BEFORE ANY PARTICIPATION WILL BE ALLOWED

Participant's Name	Date of Birth / /
	City/State/Zip
Gender (circle one) M F Age G	rade
Emergency Contact	
Relationship to Participant	Phone Number
Α	GREEMENT, WAIVER AND RELEASE
Graduation Dance at Razberry's Banque discharge any and all claims for damage hereafter accrue to me, as a result of participation and the Holland Township PTO, it connected in any way with my participating that liability may arise out of negligent as the ones I will be participating in invassume those risks. It is further agreed assigns. I agree to indemnify and to ho any loss, liability, damage, cost or expediamage that I may sustain while participating, all I understand that by participating, all I	the Holland Township PTO to participate in the activity of the 8 th Grade uet Center at 834 NJ-12 Frenchtown, NJ 08825, I hereby waive, release and a for personal injury, death or property damage which I may have, or which may articipation in activities at said facilities. This release is intended to discharge in sofficers, volunteers and agents from any and all liability arising out of or ation in activities at this or any other Holland Township PTO facility even though e or carelessness on the part of those parties. It is understood that activities such olve an element of risk and danger of accidents and knowing those risks, I hereby that this waiver, release and assumption of risk is to be binding on my heirs and Id harmless, the Holland Township PTO, its officers, volunteers and agents from use which they may incur as the result of my death or any injury or property ipating in any activity at this or any other Holland Township PTO facility. Participants consent to photo images taken by the Holland Township PTO and Holland Township PTO
	PARENT/GUARDIAN (If Participant is a minor)
I am the parent or legal guardian of the activities at this, or any other Holland his/her behalf. I hereby affirmatively sthereby agree to indemnify and hold the damage, cost or expense that they may participant may sustain while participated in the content of	e participant listed above. I hereby consent that the participant may participate in ownship PTO facility and I hereby execute the Agreement, Waiver and Release or rate that the said Participant is physically able to participate in said activity. I e persons and entities mentioned above free and harmless from any loss, liability, incur as result of the death or any injury or property damage that said ting in activities at any such Holland Township PTO facility. MENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM BILITY AND A CONTRACT BETWEEN MYSELF AND THE HOLLAND TOWNSHIP PTO
Print Name	Relationship
Signature	