

Teen Maze Permission Slip



PARENT PERMISSION

(Form must be signed prior to participation)

This permission slip allows my child to attend Teen Maze on April 16th and/or 17th 2015

- I understand the nature of Teen Maze and want my child to participate in it.
- I understand that my child will be filling out survey information for the Teen Maze.
- I understand that my child will be participating in various activities and that my child will be under the supervision of Teen Maze staff and volunteers. I understand that Teen Maze is dedicated to advocacy for youth and families and under law must report any allegations of child abuse, or any prior knowledge of the youths' intent to harm self or others.

I, _____ as parent or guardian **(circle one)**

of _____ **(print child's name)**, represent to Teen Maze and School Community Youth Collaborative; A Program of Onward! A Legacy Foundation, that I have the authority to give permission and release liability for any mental, emotional, or physical injuries and/or death that might occur to said child while participating in the Teen Maze.

The undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and un-known, even if arising from the negligence of the releasees or others, and assume full responsibility for my child's participation, and,
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless Teen Maze and School Community Youth Collaborative; a Program of Onward! A Legacy Foundation, their officers, officials, agents, volunteers and/or employees, other participant sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____
(Parent/Guardian Signature)

Emergency Phone #

Date Signed

(Please see next page)



