

Registration and Liability Waiver

BBBSG Soap Box Derby 2019

_____	_____
Child's Last Name	Child's First Name
_____	_____
Date of Birth	Age
_____	_____
Email Address	Phone Number

Disclaimer

- I give my informed consent for my dependent to participate in this event. I am aware of the risks involved and I agree to indemnify and hold blameless Big Brothers Big Sisters of Guelph, its staff, volunteers and directors from and against any loss, damage, or injury suffered by the participant as a result of being part of the activities of BBBSG Soap Box Derby.

Big Brothers Big Sisters of Guelph staff and volunteers are not authorized to administer medication.

- I also give consent to Big Brothers Big Sisters of Guelph to use any photographs or videos taken during the event for promotional purposes.
- I give my consent to receive emails from Big Brothers Big Sisters about other fundraising events in the community.

The information collected will be permanently maintained, as it is a requirement of our insurance company and legal counsel.

PLEASE SIGN YOUR NAME TO AGREE TO THE TERMS AND CONDITIONS

Dated this ____ (day) of _____ (month), 20 ____.

(signature of parent/guardian)