



ADULT ATTENDEE FORM Please print.

Location Visiting _____

Date of Visit _____

Group Name _____

Grade Level _____

Participant Name _____

Participant Age _____

Full Address of Parent/Guardian _____

Cell Phone _____

Home Phone _____

Email _____

Waiver of Liability:

I recognize that there are risks associated with this activity and I should not participate in the activity unless medically able to do so. I assume all risks associated with the activity, including but not limited to: falls, trips, contact with equipment, weather effects, contact with other participants, the natural environment and wildlife, animals, insects. I understand that neither Mill Creek MetroParks, nor its commissioners, officers, employees, agents, volunteers, or sponsors assume any responsibility or liability with regards to my participation in this Activity. I agree and do hereby waive any and all claims against, and agree to release, hold harmless, and indemnify all members of Mill Creek MetroParks from any and all claims related to illness, injury, including loss of life, property damage, or loss of any other description which may be sustained arising out of, in any way associated with, participation in the activity. In the event of injury or illness, I authorize Mill Creek MetroParks to provide first aid and/or medical treatment or to obtain first aid/medical treatment at the nearest and most adequate facility of Mill Creek MetroParks' choice.

Printed Name _____

Signature _____

Date _____

Photo Release:

I hereby authorize Mill Creek MetroParks to use, reproduce, and/or publish photographs and/or video that may pertain to me including image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising, multimedia exhibits or for other related endeavors, including for commercial purposes. This material may appear on Mill Creek MetroParks or project sponsor's Internet Web Page and/or digital social media services. By signing, I acknowledge that I have read and understand the above and release any claims against Mill Creek MetroParks.

Select and check one line below; sign and date

_____ I AGREE Signature _____

Date _____

--OR--

_____ I DISAGREE Signature _____

Date _____