



Application For Participation In The Arc of Central Plains Activities Parent or Guardian Release

Applicant's Name: _____

Applicant's Age _____

Address: _____
(Street)

(City) (State) (Zip)

Phone Number: _____
(Home)

(Cell)

I, the undersigned parent and/or legal guardian of the above (hereinafter referred to as the "Entrant"), hereby request permission for the Entrant to compete in activities sponsored by The Arc of Central Plains.

I represent and warrant to you that the Entrant is physically and mentally able to compete in these activities, and I submit herewith a subscribed medical certificate.

I hereby acknowledge that the Entrant will be using facilities at his/her own risk and said parent and/or legal guardian, on his/her behalf, hereby releases, discharges, and indemnifies The Arc of Central Plains from all liability for injury to person or damage to property to himself/herself or applicant.

In permitting the Entrant to participate, I am specifically granting permission to you to use the likeness, voice, and words of the Entrant in television, radio, films, newspapers, magazines, and other media, and in any form not heretofore described, for the purpose of advertising or communicating the purposes and activities of The Arc of Central Plains and in appealing for funds to support such activities.

If I am not personally present at The Arc of Central Plains activities in case of necessity, you are authorized on my behalf and at my account to take such measures and arrange for such medical and hospital treatment as you may deem advisable for the health and well-being of the Entrant.

Date: _____

Signature: _____

Printed Name: _____