

## RELEASE OF LIABILITY AGREEMENT UPLIFT TEENS AUXILIARY OF UPLIFT COMMUNITY ALLIANCE

1.	I,am the parent, and/or legal guardian of				
	A minor, hereinafter referred to as "My Child". My child is a member of Uplift Teens an auxiliary of Uplift Community Alliance.				
2.	I understand that while My Child is participating in activities for Uplift Teens, there is a risk of injury to him/her, which could result in loss of property, personal injury or death. On behalf of myself, My Child, our heirs, personal representatives, executors and assigns, I release, discharge indemnify and hold harmless Uplift Teens, its agents, employees, directors, servants, members, successors, heirs, assigns and volunteers from any claims, causes of action or demands of any nature or cause connected with My Child's participation. This includes but is not limited to, damages, attorney's fees and court costs incurred in connection with any claim or suit based on damages or injuries alleged to have been incurred by My Child while participating with Uplift Teens.				
me	which could result in loss of property, personal injury or death. On behalf of myself, My Child, personal representatives, executors and assigns, I release, discharge indemnify and hold is Uplift Teens, its agents, employees, directors, servants, members, successors, heirs, assigns inteers from any claims, causes of action or demands of any nature or cause connected with My articipation. This includes but is not limited to, damages, attorney's fees and court costs in connection with any claim or suit based on damages or injuries alleged to have been by My Child while participating with Uplift Teens.  Itease, discharge, indemnify and hold Uplift Teens, its agents, employees, directors, servants, accessors, heirs, assigns and volunteers harmless from any and all damages and costs me while my child is participating with Uplift Teens.  It that public relations are an important aspect of volunteering at Uplift Teens, I agree on behalf y Child, or heirs, personal representatives, executors and assigns to allow Uplift Teens and its se any photographs, video or film taken of me or my child for use in public relations efforts. will use all reasonable efforts to notify me of such publication, but notification is not required for aphs, video or film to be used for public relations' purposes				
I understand that public relations are an important aspect of volunteering at Uplift Teens, I agree on behat of myself, My Child, or heirs, personal representatives, executors and assigns to allow Uplift Teens and it agents, to use any photographs, video or film taken of me or my child for use in public relations efforts. Uplift Teens will use all reasonable efforts to notify me of such publication, but notification is not required the photographs, video or film to be used for public relations' purposes					
I,_ ag	Uplift Teen have read and fully understand the terms and conditions of this eement and I will fully comply with all its conditions.				
	ne parent/guardian of(name) have read and fully understand the terms and inditions of this volunteer agreement and I will fully comply with all its conditions.				
 Da	te Parent/Guardian				

Uplift Teen

3.

4.

Date