

# Family Field Day Registration & Release Form

Adult/Guardian Name: \_\_\_\_\_  
First Name Last Name

Participants: Please list all members of your group with their ages.

First Name	Last Name	Age	First Name	Last Name	Age
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Email \_\_\_\_\_ Zip Code \_\_\_\_\_

Physical Address if no Email \_\_\_\_\_

Phone number \_\_\_\_\_

**Release of Liability Waiver Statement – Please read before signing:**

In consideration of my attending Family Field Day, I release and discharge the Yakima Greenway Foundation, all of its agents, volunteers, employees, and all co-sponsors: the City of Yakima, CWU Dietetic Interns, and Fit Kids USA from any and all liability arising from illness, injuries, disabilities, damages, and death that I may suffer as a result of participating in this event. I know there are risks of serious injury, disability, or illness in this activity. I believe that I am or my child is physically capable of participating in this event. I also understand and agree that any sponsor may subsequently use my picture and name for publicity/promotional purposes without my further consent. In signing this document, I intend to bind my successors and assigns or anyone acting on my behalf and further shall save and hold harmless all of the parties named above. As the parent(s) or legal guardian(s) of the named minor participant I understand the above listed points and agree to allow the minor to participate. The undersigned have read the foregoing waiver and release, understand that they have given up substantial rights by signing it, and sign it voluntarily.

*(Print the name of each participant and the participant's parent or guardian must sign the waiver if under 18 years of age in order to participate)*

Participant/Parent/Guardian signature:

\_\_\_\_\_ Date: \_\_\_\_\_