



**RELEASE OF LIABILITY AGREEMENT
ASSISTEENS® AUXILIARY OF SALT LAKE CITY**

1. I, _____, am the parent, and/or legal guardian of _____, a minor, hereinafter referred to as "My Child." My Child is a member of Assisteens, an auxiliary of Assistance League of Salt Lake City. I understand that Assistance League of Salt Lake City is a chapter of National Assistance League®. Assisteens, Assistance League of Salt Lake City, and National Assistance League shall hereinafter be referred to as Assisteens.
2. I understand that while My Child is participating in activities for Assisteens, 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 Assisteens, 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 Assisteens.
3. I agree to release, discharge, indemnify and hold Assisteens, its agents, employees, directors, servants, members, successors, heirs, assigns and volunteers harmless from any and all damages and costs incurred by me while my child is participating with Assisteens.
4. I understand that public relations are an important aspect of volunteering at Assisteens. I agree on behalf of myself, My Child, our heirs, personal representatives, executors and assigns to allow Assisteens, and its agents, to use any photographs, video or film taken of me or my child for use in public relations efforts. Assisteens will use all reasonable efforts to notify me of such publication, but notification is not required for the photographs, video or film to be used for public relations' purposes.

I, _____ (Assisteen) have read and fully understand the terms and conditions of this agreement, and I will fully comply with all its conditions.

I, the parent/guardian of _____ (name) have read and fully understand the terms and conditions of this volunteer agreement, and I will fully comply with all its conditions.

Date

Parent/Guardian

Date

Assisteen