

**AGREEMENT, WAIVER AND RELEASE**

In consideration of being permitted by Little Friends, Inc. ("Little Friends), to participate in activities at Little Friends Facilities or those a part of a planned Little Friends activity, including work spaces, recreation and education, I hereby waive, release, and discharge any and all claims for damage for personal injury, death or property damage which I may have, or which may hereafter accrue to me, as a result of participation in activities at said facilities. This release is intended to discharge in advance Little Friends, its officers, employees and agents from any and all liability arising out of or connected in any way with my participation in activities at this or any other Little Friends facility even though that liability may arise out of negligence or carelessness on the part of those parties. It is understood that activities such as the ones I will be participating in involve an element of risk and danger of accidents and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold harmless, Little Friends, its officers, employees and agents from any loss, liability, damage, cost or expense which they may incur as the result of my death or injury or property damage that I may sustain while participating in any activity at this or any other Little Friends facility.

Refusal to consent may result in the inability of Little Friends to provide access to these activities.

You have the right to request to inspect or copy the information to be disclosed.

You have the right to revoke this consent at any time.

This consent is valid for one year.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

## CONSENT OF PARENT/GUARDIAN

(If Participant is a minor or under a disability such that a parent or guardian must provide consent) I am the parent or legal guardian of the participant listed above, and I represent and warrant that I am authorized to and have the authority to execute this Agreement, Waiver and Release, on behalf of the participant. I hereby consent that the participant may participate in activities at this, or any other Little Friends facility and I hereby execute the Agreement, Waiver and Release on his/her behalf. I hereby affirmatively state that the said Participant is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost or expense that they may incur as result of the death or any injury or property damage that said participant may sustain while participating in activities at any such Little Friends facility.

I HAVE CAREFULLY READ BOTH FRONT AND BACK OF THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND LITTLE FRIENDS, INC. AND I SIGN IT OF MY OWN FREE WILL.

Refusal to consent may result in the inability of Little Friends to provide access to these activities.

You have the right to request to inspect or copy the information to be disclosed.

You have the right to revoke this consent at any time.

This consent is valid for one year.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

## Media Consent and Release

I understand that by participating, all Participants consent to the use of their names, photo images and videos taken by Little Friends staff during this activity to be used in any or all Little Friends publications and websites.

Refusal to consent will result in no publication of name, photos or videos.  
You have the right to request to inspect or copy the information to be disclosed.  
You have the right to revoke this consent at any time.  
This consent is valid for one year.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date