

**LAKE UNION CREW
OUTREACH FOUNDATION**

RELEASE AND WAIVER OF LIABILITY FOR MINORS

Name of Minor Volunteer _____

Date _____

Home Address _____

Phone _____

Date of Birth _____

RELEASE

This is to certify that I am a parent or legally authorized guardian of the above named Minor Volunteer and am legally competent to enter into this Release. I hereby give my permission for the Minor Volunteer to attend and participate in a project in Haiti, organized by Lake Union Crew Outreach Foundation (the "Event").

Should the Minor Volunteer become incapacitated for any reason and require medical treatment, and I am not immediately available, I hereby give any employee or volunteer of Lake Union Crew, LLC and/or Lake Union Crew Outreach Foundation ("LUC/LUCOF") permission to authorize medical treatment for him/her, as they deem reasonable or necessary, without additional permission from me. I agree to assume responsibility for all costs advanced by LUC/LUCOF in order to obtain medical care for them.

I represent and warrant that he/she has all necessary, valid and current paperwork to permit travel to and from the location of the Event, including without limitation, all passports, visas, and vaccinations.

I consent to the use of his/her name and/or photographs in brochures, advertisements, web pages, and other publications approved by the Executive Director of LUCOF or his/her designee. I hereby grant and convey unto LUC/LUCOF all right, title, and interest in any and all photographic images and video or audio recordings made by LUC/LUCOF or any designee during their time at the Event, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

I agree to supervise his/her behavior so that he/she conducts him/herself in a respectable and safe manner. Should a conduct code violation occur, law enforcement personnel and/or security may be called to assist, and the on-site leadership person of LUC/LUCOF shall determine the appropriate consequences. I take full responsibility for his/her actions and should he/she be sent home, I agree to be responsible for any costs related his/her return trip home.

In return for allowing the Minor Volunteer to participate in the Event, I hereby agree to **RELEASE, HOLD HARMLESS** and **INDEMNIFY** Lake Union Crew, LLC, Lake Union Crew Outreach Foundation and each of their respective employees, volunteers, agents, contractors, officers, directors and affiliates (“Releasees”) from, and covenant not to sue with respect to, all claims for any injury, loss or damages resulting from any cause, known or unknown, including negligence, which arises out of his/her travel to, and from the Event and any activities related to the Event.

I understand that, except as otherwise agreed to by LUC/LUCOF in writing, neither LUC/LUCOF nor any of the Releasees carry or maintain health, medical or disability insurance coverage for the Minor Volunteer and that I am expected and encouraged to obtain and maintain his/her medical or health insurance coverage during the Event.

This Release is also binding as to any other persons, including my family members, heirs, and executors.

This Release is governed by and interpreted in accordance with the laws of the State of Washington. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

I have read, understood and agree to the conditions and responsibilities as outlined in this Release. I agree that I have signed this Release voluntarily.

Signature: _____

Minor’s Signature: _____

Witness: _____

Date: _____