



**Frederick Youth Commission
Consent, Liability and Media Release Form**

Participant:

I, the undersigned, do hereby consent to my participation in the Town of Frederick Youth Commission. I acknowledge that I will attend all meetings, special meetings and events relative to this program, and that I understand that I will be removed from membership for failure to do so. I also acknowledge that upon submission of the application, I will be considered for membership with all other applicants and that I may or may not be selected. I further acknowledge that my participate in the program is voluntary.

Participant Name: _____

Participant Signature: _____

Parent/Legal Guardian:

I, the undersigned, do hereby consent to my child's participation in the Town of Frederick Youth Commission.

I agree to indemnify and hold the Town of Frederick, its staff, agents, consultants, and representatives harmless from any losses, damages, or injury which may result from my child's participation in activities with the Frederick Youth Commission. This release of liability and indemnity applies equally to losses, damages or injuries caused or alleged to be caused in part by the negligence of the Town. I further agree to release, waive, and discharge, and covenant not to sue the Town for any claims, demands, or actions whatsoever arising out of any damage, loss or injury incurred on or to my child as a result of my child's participation in the event for which my child has applied. This release of liability and indemnity applies to my child, the undersigned as well as any of my personal representatives, assigns, heirs, and next of kin.

I give the Town of Frederick the right to use any photos from meetings and events for their website, social media sites, publications or any other promotion they see fit.

By signing below, I agree I have read and fully understand the effect of the relinquishment of my child's rights that I hereby waive.

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Signatures: _____

Emergency Contact Name: _____

Relationship to Participant: _____

Emergency Contact Phone Number: _____

Built on What Matters.