

## **Cowboy Festival Waiver**

I voluntarily agree to participate, or for my child to participate, in the City of Santa Clarita's Cowboy Festival. I hereby waive, release, and hold harmless from any liability or claims for damages for personal injury, including death, as well as from claims or property damage which may arise in connection with the above-named activity, against the supervisor, the City of Santa Clarita and their elected and appointed officials, agents, and employees. As parent/guardian, I hereby consent to treatment of my minor child for any and all medical procedures deemed necessary, as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment. I hereby give permission to the City of Santa Clarita Recreation and Community Services Department to use my, or my children's, photographs as they see fit in their volunteer materials, recreation brochure or other advertising. I understand all photographs belong to the City of Santa Clarita and I will not receive payment of any kind.

<b>BE SURE TO PROVIDE ALL INFORMATION.</b> Please use BLUE or BLACK ink ONLY and write legibly.			
Name of Group/Organization:	(if applicable)		
I, (Volunteer)	(Print Name)		_ residing at
(Print Street Address, City, and Zip Code)			
Phone:	Email:		
hereby agree to the Volunteer Agree	ement set forth on this day of		, 2018.
☐ I am an adult volunteer:			
Signature:	Date of Birth:		
☐ I am the parent/guardian of a min	or volunteer:		
Name of Parent/Guardian:	Signature of Pa	rent/Guardian:	
Name(s) of minor(s) volunteering:		Date of Birth:	
		Date of Birth:	
		Date of Birth:	