



## Keep Canyon Lake Beautiful Registration Form

### PLEASE PRINT

Name of Participant \_\_\_\_\_ Age \_\_\_\_\_

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Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell # \_\_\_\_\_ Email \_\_\_\_\_

Name and Phone of Emergency Contact \_\_\_\_\_

### LIABILITY AND ASSUMPTION OF RISK *(Please read carefully, initial each paragraph, and sign at the bottom.)*

\_\_\_\_\_ As a participant and/or on behalf of my children, I hereby release, discharge, and further agree to hold harmless Keep Canyon Lake Beautiful, Keep Texas Beautiful, and WORD of Comal County and any agents, employees, officers, directors, contractors, and successors of the above mentioned organizations (Hereinafter referred to as "Released Parties") from any and all claims, losses, damages, demands, and causes of action, suits, and liability of every kind arising out of, connected to, or resulting from this activity, including without limitation, and claims of loss, damage, or destruction of property, or injury (including death).

\_\_\_\_\_ I declare that I and/or my child(ren) is/are in good mental and physical fitness for an event of this nature.

\_\_\_\_\_ In consideration of mine and/or my child(ren) being allowed to participate in KEEP CANYON LAKE BEAUTIFUL I hereby personally assume all risks in connection with the event for any harm, injury, or damage that may befall me or my child(ren) while participating in KEEP CANYON LAKE BEAUTIFUL cleanup event, including all risks connected therewith, whether foreseen or unforeseen.

\_\_\_\_\_ I further save and hold harmless said activity and Released Parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of mine and/or my child(ren)'s participation in this activity, including both claims arising during the activity or after myself and/or my child(ren) has completed the activity.

\_\_\_\_\_ I further declare that I am legally competent to sign this liability release on behalf of myself and/or my child(ren).

\_\_\_\_\_ I further grant Released Parties the right to take photographs of myself and/or my child(ren). I authorize Released Parties, its assigns and transferees to copyright, use and publish the same in print and/or electronically for such purposes as publicity, illustration, advertising and web content.

Printed Name of Participant: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

**If under 18 yrs. of age, PARENT SIGNATURE REQUIRED:** \_\_\_\_\_

Date: \_\_\_\_\_