

Instructions for Completing Waivers

- 1) Print out the four (4) forms attached. (Print in color if possible)**
- 2) All 4 forms must be filled in COMPLETELY. If forms are not completed and signed properly your minor child will not be allowed to participate in the event.**
- 3) Page 1 and 4 must be completed and signed by one parent/guardian.**
- 4) Page 2 of 4 MUST be initialed by both parents (except in the case of a single parent family).**
- 5) Page 3 of 4 MUST be signed and dated by BOTH parents (except in the case of a single parent family), and their signatures should be witnessed by a third party.**
- 6) Page 4 MUST be signed and dated by your minor child and witnessed by a third party.**



Media Use Release

Being of legal age, I hereby consent and authorize Ford Motor Company, its successors, assigns, nominees and clients to use and reproduce the name, picture(s) (moving and/or still) and statement(s) (oral and/or written) of my minor son/daughter/ward,

(Minor's Name)

with the privilege of editing or rearranging but not changing the original meaning, and to copyright and circulate the same for any and all commercial purposes and in any manner, including but not limited to publications, audio-visual presentations and advertisements of all kind in all media.

With respect to the rights granted herein to use the name, above-described picture(s) and/or statements of my son/daughter/ward, no promises or compensation have been made to me to secure my signature to this release.

Further, all statements, opinions and judgments made by me are in my opinion true, accurate and not misleading.

PRINT PARENT / GUARDIAN: _____

PARENT / GUARDIAN SIGNATURE: _____

EMAIL ADDRESS: _____
(Used only for survey follow up)

DATE: _____

Note: You must bring this signed waiver, along with your driver's license or permit in order to participate in the driving activities.



**PARENTAL CONSENT, RELEASE AND WAIVER OF
LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY
AGREEMENT**

Hands-On Training / Ford Driving Skills for Life

IN CONSIDERATION of my minor child (the "Minor") being permitted to participate in any way in the EVENT(S) and/or being permitted to enter for any purpose any RESTRICTED AREA(S) (defined to be any area which requires special authorization, credentials or permission to enter or any area to which admission by the general public is restricted or prohibited), I agree:

1. I know the nature of the EVENT(S) and the Minor's experience and capabilities, and believe the Minor to be qualified to participate in the Event(s). I will inspect the premises, facilities, and equipment to be used, or with which the Minor may come in contact. IF I OR THE MINOR BELIEVE ANYTHING IS UNSAFE, I WILL INSTRUCT THE MINOR TO IMMEDIATELY LEAVE THE RESTRICTED AREA AND REFUSE TO PARTICIPATE FURTHER IN THE EVENT(S).
2. I FULLY UNDERSTAND and will instruct the Minor that: (a) THE ACTIVITIES OF THE EVENT(S) ARE POTENTIALLY VERY DANGEROUS and participation in the Event(s) and/or entry into Restricted Areas involves RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by the Minor's own actions, or inactions, the actions or inactions of others participating in the Event(s), the rules of the Event(s), the condition and layout of the premises and equipment, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) that the other participants in the Event(s) may be minors with limited driving experience and/or ability; (d) there may be OTHER RISKS NOT KNOWN TO ME or that are not readily foreseeable at this time; (e) THE SOCIAL AND ECONOMIC LOSSES and/or damages that could result from those Risk(s) COULD BE SEVERE AND COULD PERMANENTLY CHANGE THE MINOR'S FUTURE.
3. I consent to the Minor's participation in the Event(s) and/or entry into restricted areas and HEREBY ACCEPT AND ASSUME ALL SUCH RISKS, KNOWN AND UNKNOWN, AND ASSUME ALL RESPONSIBILITY FOR THE LOSSES, COSTS AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW.

PARENT INITIAL _____
PARENT INITIAL _____

4. I HEREBY RELEASE, DISCHARGE AND AGREE NOT TO SUE the promoters, participants, track operators, track owners, officials, car owners, drivers, rescue personnel, any persons in any Restricted Area, promoters, sponsors, advertisers, owners and lessees of premises used to conduct the Event(s), premises or event inspectors, surveyors, underwriters, consultants, driving instructors and other persons or entities who give recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or Event(s) and each of them, their directors, officers, agents, and employees, all for the purposes herein referred to as "Releasees," FROM ALL LIABILITY TO ME, THE MINOR, my and the minor's personal representatives, assigns, heirs and next of kin, FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON ACCOUNT OF ANY INJURY TO ME OR THE MINOR, including, but not limited to, death or damage to property, CAUSED OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE.

5. If, despite this release, I, the Minor, or anyone on the Minor's behalf, makes a claim against any of the "Releasees" named above, I AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS THE RELEASEES and each of them from ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE, OR COST THEY MAY INCUR DUE TO THE CLAIM MADE AGAINST ANY OF THE "RELEASEES" NAMED ABOVE, WHETHER THE CLAIM IS BASED ON THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

6. I sign this agreement on my own behalf and on behalf of the Minor.

I HAVE READ THIS PARENTAL CONSENT RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, UNDERSTAND THAT BY SIGNING IT I GIVE UP SUBSTANTIAL RIGHTS I AND/OR THE MINOR WOULD OTHERWISE HAVE TO RECOVER DAMAGES FOR LOSSES OCCASIONED BY THE RELEASEES' FAULT, AND SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT.

For two parent families BOTH parents must sign.

I HAVE READ BOTH PAGES OF THIS RELEASE

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Date

I HAVE READ BOTH PAGES OF THIS RELEASE

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Date

Signature of Witness

Printed Name of Witness

Date

Note: You must bring this signed waiver, along with your driver's license or permit in order to participate in the driving activities.



MINOR'S ASSUMPTION OF RISK ACKNOWLEDGMENT

I have obtained my parent's or my guardian's consent to participate in the 2019 Ford Driving Skills for Life Ride & Drive Program ("Event"). I understand that I am assuming all of the risks if I get hurt during the Event, and I state the following:

1. My parents/guardian and I believe I am qualified to participate in the Event. I will inspect the premises and equipment and if, at any time, I feel anything to be unsafe, I will immediately leave and refuse to participate further in the Event.
2. I fully understand that the activities involved in the Event may involve the risk of injury and/or death.
3. I know that these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Event, who may also be minors with limited driving experience and ability, the rules of the Event, the condition and layout of the premises and the equipment, or the negligence of others, including those persons responsible for conducting or otherwise involved in the Event.

This Agreement is interpreted by, and intended to be as broad and inclusive as is permitted by Michigan law and that if any portion hereof is held invalid, that the balance shall, notwithstanding, continue in full legal force and effect. Any litigation related to the Event and/or this Agreement shall be brought only in a court of competent jurisdiction in the State of Michigan.

I HAVE READ THE ABOVE ASSUMPTION OF RISK ACKNOWLEDGEMENT, UNDERSTAND WHAT I HAVE READ, AND SIGN IT VOLUNTARILY.

I HAVE READ THIS RELEASE

Signature of Participant

Print Name of Participant

Date

Signature of Witness

Print Name of Witness

Date

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