



# THE PERRY INITIATIVE

## General Information

I am a (check one):  Student Participant  Volunteer

Specify Program Year and Location \_\_\_\_\_  
(Write "Mentoring Program" if Find-A-Mentor Program Volunteer)

## Contact Information

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

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Guardian (if under 18) \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Use of Likeness & Statements

I hereby authorize The Perry Initiative to use any photographs and statements made by me in regards to The Perry Initiative for promotional purposes.

I agree  I do not agree

\_\_\_\_\_  
Signature of Participant (or Guardian if under 18)

\_\_\_\_\_  
Date

## Permission to Contact

I hereby authorize The Perry Initiative to contact me in the future regarding any events and promotional activities related to The Perry Initiative. I understand that The Perry Initiative will not release my contact information for any other purpose.

I agree  I do not agree

\_\_\_\_\_  
Signature of Participant (or Guardian if under 18)

\_\_\_\_\_  
Date



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## Waiver of Liability, Assumption of Risk, and Indemnity Agreement

**Waiver:** In consideration of being permitted to participate in any way in The Perry Initiative: Perry Outreach Program and Find-a-Mentor Program, hereinafter called "The Activity", I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Perry Initiative, its officers, employees, and agents from liability **from any and all claims including the negligence of The Perry Initiative, its officers, employees and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

**Assumption of Risks:** Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

**I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent** in The Activity. I hereby **assert that my participation is voluntary and that I knowingly assume all such risks.**

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Perry Initiative HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledgment of Understanding:** I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

\_\_\_\_\_  
Signature of Participant (or Guardian if under 18)

\_\_\_\_\_  
Date