



Worcester County League of Sportsmen's Clubs



Waiver and Release of Liability/Negligence/Photographs

Club Member Visitor Participant

Please complete one form for each adult. Children may be registered along with an adult family member on another identical form. You must be a parent or legal guardian to register children under 18 years old. The Worcester County League of Sportsmen's Clubs (WCLSC) reserves the right to deny its services and/or your participation in any of its programs, or those that are conducted by its contractors or other service providers, to any individual (or legal representative) for any reason, including but not limited to failure to complete and sign this Waiver and Release of Liability/Negligence Form.

| General Information | | | |
|---------------------|-----|------------|--|
| Name | | Phone | |
| Address | | Email | |
| City | | Sex | |
| State | Zip | Birth Date | |
| Name | | Phone | |
| Address | | Email | |
| City | | Sex | |
| State | Zip | Birth Date | |

Waiver and Release of Liability/Negligence/Photographs

I, for myself, and on behalf of any minor child to be registered and to whom I am a parent or guardian, hereby release the WCLSC and its directors, officers, members, employees, contractors, permittees, agents, representatives, volunteers, and other entities working for or with WCLSC ("Providers") from any and all liability/negligence, loss, damages, costs, claims and/or causes of action, including but not limited to property damage and emotional and bodily injuries, including death, arising in any way from my or my child's or ward's participation in any program, course or activity of every type and description provided or sponsored by the Providers. I understand that my or my child's or ward's participation in such program, course or activity may involve risk, known and unknown, and the possibility of injury to myself or to my child or ward, and to others, and of property damage. I hereby release and hold the Providers harmless from liability/negligence for any such injury or damage, whether incurred by me, my minor child or my ward, and including any injury that may occur as a result of emergency care provided by the Providers. I also hereby indemnify the Providers from any liability/negligence, loss, damages, costs, claims and/or causes of action brought by the minor child, the ward, or members of the minor child's or ward's family arising from their participation, and from claims of others who I or my child or ward injure while participating in such program, course or activity, including any injury that may occur as a result of emergency care provided to others by the Providers.

By participating in activities offered by WCLSC and its contractors, I give the Providers unlimited access to and use of all photographs in which I (or my ward or minor child) appear for publication or display in newsletters and other media used to illustrate, advertise or promote opportunities offered by the Providers.

I have read and understand the above:

SIGNATURE (or as Legal Representative on behalf of minor child or ward)

AGE of participant

DATE

If using Legal Representative, provide legal designation:

DESIGNATION (e.g., parent or court-appointed guardian)

NAME(s) of minor or ward

DATE