

BRIGADE DRILL TEAM & STEP SQUAD

Tacoma, WA 98418 (206) 331-6977



Statement of Waiver/Hold-Harmless Agreement And Activity Permission Form

Statement of Waiver/Hold-Harmless Agreement

In consideration of permission to participate in the 2010-2011 Brigade Drill Teams & Step Squad functions, which includes but not limited to parades, performances, and other drill/step team events, I, _____ (Print name of Parent/Legal Guardian), do hereby waive and release any and all claims, causes of actions or suits, against The Brigade Drill Teams & Step Squad, their Directors, and/or any of their representatives, volunteers, acting officially or otherwise, from any liability arising from accident or injury to the minor of the undersigned during said drill/step team or any activity in conjunction with said drill/step team.

I, further, hereby agree to release, indemnify and hold harmless The Brigade Drill Teams & Step Squad, their Directors, and/or any of their representatives, volunteers, acting officially or otherwise, from and against any and all loss, liability or damage arising from or because of, or in connection with, participation in said drill/step team.

Name of Member: _____

Parent/Guardian Signature: _____ Date: _____

Activity Permission Form

As the parent or legal guardian of the above child, I give permission for:

1. The above named child permission to engage in the physical activities of the Brigade Drill Teams & Step Squad.
2. The above named child to be transported by a designated professional/volunteer driver.
3. The drill team first aide person to give over-the-counter medications for minor medical discomforts.
4. The team's staff members to arrange for emergency medical attention if I cannot be reached.
5. The above named child permission to attend any overnight trip/activity up to and including two nights.

The above named child is currently in good health and able to participate in drill team activities: Yes _____ No _____

Please insert "N/A" to the following statements if they do not apply:

My child has the following restrictions on strenuous activities: _____

My child has the following allergies: _____

Parent/Guardian Signature: _____ Date: _____

Parent Safety Agreement for Team Member

The health and safety of your child is one of our most important concerns. For this reason, we ask that you answer the questions below and read the information that follows very carefully.

1. Will your child be walking home from practices? Yes No
2. Will someone be driving him/her home from practices? Yes No
3. What is the name and phone number of the person who will drive him/her home? Name: _____
Name: _____
Phone Number: _____
4. Will anyone else have your permission to drive or walk your child home? Name: _____
5. Is there anyone that is NOT permitted to pick up your child? Yes No

I have read the information above and have answered all questions to the best of my knowledge. I understand that if my child is to have transportation, I am responsible for seeing that the designated person listed above or I will transport my child. (I understand that neither the Director, Brigade Drill Teams & Step Squad, nor its staff is responsible for driving or walking my child home unless said arrangements are made in advance.)

Parent/Guardian Signature: _____ Date: _____