WAIVER AND RELEASE OF LIABILITY POINT UNIVERSITY BANDS

In consideration of participation in related activities and events of the Point University Bands, the undersigned acknowledges, appreciates, and agrees to the following.

- 1) While personal discipline and adherence to rules may reduce risk, I understand there is potential of injury from the activities involved in this program.
- 2) I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others and assume full responsibility for my participation.
- 3) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(Participant's Printed Name)	
	Date
(Signature of Participant)	
FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF PARTICIPATION)	
This is to certify that I, as parent/guardian with legal responsibility for this participant, consent and agree to his/her release as provided above of all the releasees. For mys assigns, and next of kin, I release and agree to indemnify and hold harmless the released all liabilities incident to my child's involvement or participation in these programs above, even if arising from their negligence, to the fullest extent permitted by law.	self, my heirs, asees from any
	Date
(Signature of Parent/Guardian)	
(Emergency Contact Number)	

Please sign and email to
band@point.edu
or mail to
Point University Bands
507 W. 10th St.
West Point, GA 31833