## MINOR'S PERMISSION FORM, INDEMNIFICATION AGREEMENT, WAIVER, AND GENERAL RELEASE ("Release")

EVENT

EVENT DATE

LODGE NAME AND NO.

ASSOCIATION (if applicable)

I/We understand, recognize, and acknowledge that there are certain risks of injury to my/our child, while participating in the above stated event, and I/we agree to assume the full risk of any such injuries, damages, or loss, regardless of the severity, which may be sustained by my/our child as a result of participating in this event.

In consideration of my/our child's participating in this event, I/we, my heirs, executors and assigns, do hereby fully and forever release and discharge the Lodge, Moose International, Inc., an Indiana corporation, the Association, and their agents, directors, officers, heirs, successors, and/or employees from and against any and all liability as a result of any and all injuries, illness, claims, actions or causes of actions arising out of or in any way associated with my/our child's participation in this event.

I/we agree to indemnify and hold harmless the Lodge, Moose International, Inc., the Association, and their agents, directors, officers, heirs, successors, and/or employees against any and all claims, actions, or lawsuits whether brought by myself, anyone acting on my/our behalf, my/our child, anyone acting on behalf of my/our child, or anyone else, for any and all injuries, illness, damages, claims, and causes of action arising out of, in connection with, or in any way associated with my/our child's participating in this event.

I/we understand and acknowledge that the Lodge, Moose International, Inc., the Association, and their agents, directors, officers, heirs, successors, and/or employees are not responsible for any injury or illness occurring from my/our child's participating in this event.

This Release extends to all acts of negligence by the Lodge, Moose International, Inc., the Association, and their agents, directors, officers, heirs, successors, and or employees and is intended to be as broad and inclusive as is permitted by the laws of the State or Province in which the event is conducted, and that if any portion thereof is held invalid, it is agreed that the balance shall, by notwithstanding, continue in full legal force and effect.

I/we, the undersigned, acknowledge that I/we am/are the parent(s)/legal guardian(s) of the participant and that my/our child is under no physical disability that would prohibit his/her participation and/or involvement in this event.

My/our signature(s) indicate(s) that my/our child has my/our permission to participate in this event.

My/our signature(s) also indicate(s) that should it become necessary for my/our child to receive first aid or medical treatment for injuries sustained from this event/activity, my/our permission is granted for such treatment.

I/we affirm that the statements set forth above are true and correct and that I/we have read the terms and conditions of the foregoing Release and understand them accordingly.

Dated this \_\_\_\_\_, 20\_\_\_\_,

Child Participant's Name (Print/Type Name)

\*By:

Signature of Parent/Legal Guardian

Signature of Parent/Legal Guardian

\*Both Parents/Legal Guardians <u>must</u> sign. A form must be completed for each child.

\*By:

9-15-10