



**Chinese American Parent Association of Howard County (CAPA)
Release and Waiver of Liability and Consent of Photo Use Form**

**Program/Event: Achieve Success Together
Time Period: July 1, 2023 – June 30, 2024**

In consideration of being permitted to participate CAPA AST Program, THIS RELEASE AND WAIVER OF LIABILITY (the “Release”) is given by _____ (participant's name) and/or his/her parents or legal guardian(s) in favor of the Chinese American Parent Association of Howard County (CAPA), a non-profit organization operated by a group of volunteers, and its board members, volunteers, administrative officers, employees and any other associated personnel including owners or landlords of the premises utilized by the CAPA for activities performed (“CAPA personnel”).

Participant acknowledges, agrees, and represents that participant enters this agreement freely and voluntarily with all information fully disclosed to the CAPA.

Participant does hereby give this Release under the following terms:

- 1. Waiver and Release.** Participant fully understands that participant’s participation in the program/event involves risks, and does hereby release and forever discharge and hold harmless CAPA and/or the CAPA personnel from any and all liability, claims, and demands that participant may have with respect to the program/event.
- 2. Media/Photographic Release.** Participant does hereby grant and convey unto the CAPA all rights, title, and interest in any and all photographic images and video or audio recordings made by CAPA during the participant’s activities with respect to the program/event.

PARENTAL PERMISSION

In consideration of the opportunity afforded my (our) child to participate CAPA program/event, I (we) give my (our) permission for my (our) child to participate in the program/event, and I (we), on behalf of my (our) child and myself (ourselves) agree to the terms and conditions set forth within this agreement Without limiting the generality of the foregoing, I (we), on behalf of my (our) child and myself (ourselves), do hereby release and forever discharge and hold harmless CAPA and/or the CAPA personnel from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my (our) child’s activities with respect to the program/event.

Participant Print Name _____ Signature _____ Date _____

Parent or Legal Guardian Print Name _____ Signature _____ Date _____

Parent or Legal Guardian Print Name _____ Signature _____ Date _____

Parent or Legal Guardian Email:

Parent or Legal Guardian Phone: