



The All-Ohio State Fair Youth Choir

Dr. Jon C. Peterson, *director*

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2018 AOSFYC Reunion Participant Permission and Release

The undersigned parent or legal guardian of the participant below identified, and the undersigned participant if 18 years of age or older (herein called "Participant"), hereby grant permission for the Participant to participate in the 2018 All-Ohio State Fair Youth Choir Reunion in Columbus, Ohio (herein "Reunion"). I/We release and hold harmless the All-Ohio State Fair Youth Choir, Inc., its sponsors, directors, counselors, officers, employees, representatives, members, agents, affiliates, and volunteers (herein collectively called "Releasees") from any and all liability for negligence or any other claim, judgment, loss, liability, cost and expense (including, without limitations, attorney's fees and costs) arising out of or connected with the Reunion, including any claim arising out of or connected with any illness or injury or death that the Participant may incur or sustain during the Reunion.

In consideration of Participant's participation in the Reunion, I/we hereby consent to Participant being the subject of appropriate photographs of Releasees, and hereby authorize Releasees to cause the same to be exhibited with or without advertising sponsorship, as still photographs, transparencies, motion pictures, television, video or other media. I/We hereby release Releasees, as well as any assignees, from any and all claims for damages for libel, slander, invasion of privacy or any other claim based on use of the above-described material(s).

I/We further agree to indemnify Releasees and Releasees' personal representatives, heirs, successors and assigns against loss from any claims, demands or actions that may subsequently be brought by Participant or by any other person on the account of damages of any nature resulting to Participant in any way from the foregoing activities.

I/We hereby warrant that I/we have read this Permission and Release in its entirety and fully understand its contents and have voluntarily signed this document.

Participant's Printed Name

Signature of Participant (if 18 or older)

Signature of Parent/Guardian

Date

Emergency Contact Name and Telephone Number(s)