



## **Informed Consent and Release of Liability**

Parent Consent Form - Mandatory for youth under the age of 18

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For good and valuable consideration, including permission for (the minor) to participate in activities with the **Rising Stars Foundation (RSF)**, I, the parent/guardian of the minor for myself and on behalf of the minor:

1. Consent to the minor's participating in **Rising Stars Foundation** related events or activities;
2. Agree that prior to the minor's participation in the event or activity, the minor and I will inspect the facilities, equipment, and areas where the event or activity is being conducted and, if either of us believes any of them are unsafe, I will immediately advise the person supervising the event, activity, facility, or area;
3. Acknowledge that the minor and I fully understand that the minor's participation may involve risk of serious injury or death, including economic losses, which may result not only from the minor's own actions, inaction, or negligence, but also from the actions, inaction, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, the rules of play or this type of event or activity;
4. Notwithstanding any other agreement, I agree to defend, hold harmless, and indemnify the **Rising Stars Foundation** against any legal liability, including reasonable attorney fees, in respect to bodily injury, death, and property damage arising from the negligence of the said;
5. Warrant that the minor is in good health and have no physical condition that would prevent the minor from participation in the event or activity;
6. Acknowledge that the **Rising Stars Foundation**, and Permittee/Sponsor of an event or activity are not joint sponsors, joint ventures, partners, or otherwise jointly engaged in any event or activity;



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7. **TRANSPORTATION RELEASE:** I allow my child to be transported to and from external **RSF** events by authorized RSF volunteer drivers that have successfully completed the **RSF Volunteer Screening Process**. I acknowledge the responsibility to pick up my child (or arrange for pick up) within one hour of conclusion of RSF activities and initiatives. In the instance that my child is transported to/from a Rising Stars Foundation Activity, I release the **Rising Stars Foundation**, its assignees, paid and volunteer staff from any and all liability and from all claims and demands.

8. **PHOTO RELEASE:** I give the **Rising Stars Foundation** the right to interview and/or take photographs and audiovisual recordings of my child to be used in promotional, educational or fundraising materials including, but not limited to videotapes, online content, pamphlets and brochures. I understand that my child's name may be used in connection with these materials. This release is voluntary, and I give it in the interest of public information, education, and furtherance of the goals of the **Rising Stars Foundation**, or other lawful purposes.

I have read this document, understand that I will give up substantial rights by signing it and sign voluntarily.

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Parent/Guardian Signature

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Print Name

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Date  
(mm/dd/yyyy)

I have read this document signed by my parent or guardian and join in the waiver, release and assumption of risk. I am aware of the risks involved in my participation in **Rising Stars Foundation** related events or activities.

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Parent/Guardian Signature

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Print Name

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Date  
(mm/dd/yyyy)



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### ***Covid-19 Specific Assumption of Risk and Waiver***

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The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, provincial, and local governments and federal and provincial health authorities have implemented regulations and recommendations regarding the size of gatherings permitted and appropriate social distancing measures to take place, depending on the nature of the activities.

The **Rising Stars Foundation (RSF)** has put in place preventative measures to reduce the spread of COVID-19; however, **RSF** cannot guarantee that you will not become infected with COVID-19. Further, participating in RSF events and activities could increase your risk of contracting COVID-19.

For good and valuable consideration, I:

1. Acknowledge the contagious nature of covid-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending any RSF events or activity and that such exposure or infection may result in personal injury, illness, permanent disability or death.
2. Understand that the risk of becoming exposed to or infected by COVID-19 at RSF events or activities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, RSF Directors and Officers, volunteers, program participants and their families.
3. Voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance at **RSF** events of activities or participation in **RSF** programming. ("Claims").



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### **Covid-19** Specific Assumption of Risk and Waiver

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On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless **RSF**, its directors and officers, agents, volunteers and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of **RSF**, its Directors and Officers, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any **RSF** events, activities or programming.

I have read this document, understand that I will give up substantial rights by signing it and sign voluntarily.

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Signature

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Print Name

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Date  
(mm/dd/yyyy)