



10-Year-Old

Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Night Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Organization you represent (if applicable): \_\_\_\_\_

Emergency Contact Name/Phone: \_\_\_\_\_

August 9-16, 2014  
Winchester, Virginia

## VOLUNTEER WAIVER

I hereby waive, release and discharge any and all claims for damages, personal injury or property damage which I may have, or which may hereafter accrue to me, against the City of Winchester, Virginia as a result of my participation in the event.

I further understand that accidents and injuries can arise out of this activity; knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the City of Winchester and persons mentioned above, who (through negligence) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

Please read above waiver and sign here: \_\_\_\_\_ Date: \_\_\_\_\_

*If volunteer is a minor, a parent/guardian must sign above. Print name:* \_\_\_\_\_



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