

Panagbenga Street Festival Dance Parade Competition

(Each participant must accomplish this form. Reproduce if necessary.)

Name of Participant: _____
Family Name First Name M.I.

Gender: Male Female Age: _____ Birthdate: _____

Home Address: _____

Home Number: _____

Parent/Guardian's Mobile Number: _____

Waiver and Release

In consideration of my son/daughter/ward's participation in the event/s of Baguio Flower Festival Foundation, Inc. (BFFFI), I, (name of Parent/Guardian) _____, acknowledge and agree, that such participation subjects him/her to the possibility of physical illness or injury (minimal, serious, catastrophic, and/or death), and that I acknowledge that I, the Parent/Guardian, is assuming the risk of such illness or injury by his/her participation in the above event/s. In the event of such injury or illness, I authorize BFFFI to obtain necessary emergency medical treatment for him/her. I hereby release and hold harmless BFFFI, their affiliates, and the respective directors, organizers, staff, and representatives (hereinafter collectively referred as "Releasees") in the exercise of this authority. I agree to release and hold harmless Releasees from any and all liability for negligence or any other claim, judgment, loss, liability, cost and expense (including, without limitation, attorney's fees and costs) arising out of or connected with my son/daughter/ward's participation in the event including any claim arising out of or connected with any illness or injury that he/she may incur or sustain as a result of his/her participation in the event. I further expressly agree to release, discharge, indemnify and hold harmless Releasees and Releasees's heirs, successors, assigns and administrators against loss from any further claims, demands, damages, or actions that may subsequently be brought by me or by any other persons on account of damages of any character resulting to my son/daughter/ward's participation in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss or cost Releasees may have to pay as a result of any such action, claim, or demand. I further acknowledge and understand that I will be responsible for any and all medical related bills that may be incurred on behalf of him/her, for any illness or injury that he/she may sustain during the above events and while traveling to and from the site for the above event. I acknowledge that if I believe that event conditions are dangerous or unacceptable, I reserve the right to withdraw my son/daughter/ward from participation in the event.

Signature of Parent/Guardian

Date

Appearance Agreement. I understand that BFFFI at times produces promotional materials relating to its programs. I understand that as a participant in and/or spectator at the above event/s the Participant may be included in videotapes or photographs taken during the above event/s. Therefore, without reservation or limitation, I hereby assign, transfer and grant to BFFFI, their successors, assignees, licensees, sponsors and television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape my son/daughter/ward, as the Participant, and to utilize such videotapes and photographs of his/her name, face, likeness, voice and appearance as part of the above noted event/s, in advertising and promoting the above noted event/s, or in advertising and promoting similar future event/s. I further understand that neither BFFFI, nor any third party is under any obligation to exercise any of the foregoing rights, licenses, and privileges.

Signature of Parent/Guardian

Date

I acknowledge and hereby warrant that I have read this Waiver and Release in its entirety and fully understand its content. I acknowledge that I am aware that this Waiver and Release releases Releasees from liability and therefore acknowledges my voluntary and knowing assumption of the risk of injury or illness. I acknowledge I have signed this document voluntarily and of my own free will.

Signature of Parent/Guardian

Date