

## Trackside Participation Waiver 2020

**This file is being provided as a reference for your files. This waiver is required for your child to participate in programs, events and activities facilitated by Trackside and will be digitally signed during registration.**

I understand that there are inherent risks and dangers in any and all activities including the one(s) for which I have registered for myself and/or my child/ward. I also understand that there is a heightened risk and danger for myself and/or my child/ward and others by participating in the prescribed activity whether in person or in an online/virtual environment. Nevertheless, I agree to defend and hold harmless and to indemnify the *Teen Center of Wilton, Town of Wilton*, its members, agents, officers, and employees and any person there within from any and all claims, actions, demands, damages, costs, and loss of services, expenses, including but not limited to attorney fees, and compensation on account of, or in any way growing out of, or arising from, my and/or my child/ward's participation in the designated activities, including but not limited to, negligence claims for injury, sickness, disease or death or property damage of any kind, against any and all of the aforementioned parties, whether or not such claim, demand, damage, cost, loss or expense is caused in part by a party indemnified hereunder.

The execution of this release is done with my full knowledge and appreciation of the act and its ramifications and is free from coercion of any kind by the *Teen Center of Wilton*, their members, agents, officers, and employees. I represent that I have carefully read and understand this Release and that I have entered into this Release knowingly and voluntarily after having had an opportunity to consult with my legal advisors, which I am encouraged to do by the Teen Center of Wilton. I further understand that I am waiving substantial rights by signing this release.

I further understand that I and or my child/ward may be photographed and recorded using video and/or audio for the purpose of reviewing behavior, promotion or advertising in future brochures, newspapers, newsletters, or in the *Teen Center of Wilton* website and social media channels. By signing this release, I am also giving permission to the *Teen Center of Wilton* to use the photos, videos and audio of me and/or my child/ward for any of the aforesaid purposes.

In the event of an illness or injury requiring medical attention, if I cannot be contacted, I grant permission for *Teen Center of Wilton* agents, officers and employees to seek emergency medical attention for my child, including hospital emergency room care. I understand and agree that I shall be responsible for all associated medical costs and related expenses.