

GUEST INFORMATION AND RELEASE

Child(ren) Name(s):	
Parent Name:	
Address:	
Cell Phone:	
Email:	

I, the undersigned, give my child(ren) and myself, permission to participate and attend American Heritage Girls NC-0226 meetings as a guest with the understanding that participating in American Heritage Girls' events is entirely voluntary and may pose risks of unforeseen hazards, accident, or injury.

I grant my permission to Registered Adults of the Troop to use their discretion to provide First Aid and life saving techniques in the event of an accident or injury. I accept responsibility, financial and otherwise, for all medical care decisions including but not limited to any First Aide and life-saving techniques provided, removal from the area of activity by car or other emergency vehicle, and obtaining medical care for myself and my child(ren).

I understand all reasonable safety precautions will be taken at all times by the Registered Adults of Troop NC-0226. I agree not to hold **American Heritage Girls NC-0226, Troop Registered Adults, Living Stones Fellowship, its leaders, employees and volunteer workers** liable for damages, losses, diseases or injuries incurred through the participation in any Troop activity. In consideration of the benefits to be derived from participation in Troop trips and activities, any and all claims against **American Heritage Girls, AHG, Inc., Troop NC-0226, and the chartered organization or against the officers, employees, agents, or other representatives of any of them, or any other persons working under their direction or engaged in the conduct of their affairs**, arising out of any accident, illness, injury, damage, or other loss harm to/or incurred to his or her property, in connection with or incidental to the activity, are hereby expressly waived.

I further understand that as a parent or guardian (or self), I assume all responsibility for the behavior of myself and my child(ren), and agree to abide by all American Heritage Girls guidelines and rules. I understand that failure to abide by these guidelines may result in dismissal from the activity.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date _____