

**NORTHWEST SPORTSMEN FOR YOUTH FOREST COUNTY YOUTH FIELD DAY, INC.
REGISTRATION AND RELEASE FROM LIABILITY FORM**

**The following form is to be completed by the parents or guardian of the youth who will be participating
in the Youth Field Day August 5, 2017 at Buzzards Swamp, Marienville PA.**

Youth's name: _____ Age: _____ Sex: _____

Birth date: _____ T-shirt size (youth or adult) S _____ M _____ L _____ XL

Parent's/Adult's name: _____ Home Phone: _____

Parent's/Adult's address _____

Parent's email address: _____

Name of Parent or Guardian accompanying youth: _____

I /We _____ (parent or guardian) do hereby permit my/our child to Participate in the various activities offered by the Northwest Sportsmen For Youth/Forest County Youth Field Day Inc. on August 5, 2017 at Buzzard Swamp at his/ her own risk. I /We _____ (parent or guardian) do hereby release the Northwest Sportsmen For Youth/Forest County Youth Field Day, Inc., Allegheny National Forest, the sponsors, and staff of the Youth Field Day, from any liability due to any accident or injury incurred during the day's activities.

Does your child have any special needs or requirements? _____ If yes, please explain:

I do hereby give permission for images of my child, captured during the filming of Forest County Youth Field Day through video, photo, and digital camera, to be used solely for the purposes of promotional material, written publications and web pages, and waive any rights of compensation or ownership thereto. In the event a participant in the Forest County Youth Field Day filming or interview is with someone other than the parent or official guardian, it is assumed that the person signing this form has spoken with the parent or official guardian who has agreed to the use of photos or video.

(Signature of parent or guardian)

(Date)

BRING THIS FORM WITH YOU ON AUGUST 5, 2017. ACTIVITIES START AT 8:00 A.M. NO ENTRIES AFTER 11:00 A.M. PLEASE PARK IN THE PARKING LOT AND WAIT FOR THE BUS TO BRING YOU OUT TO THE EVENT.