

Cycle for a Cause

Consent Form

Yes, I agree to participate in the Souris Valley United Way Cycle for a Cause to help raise funds for the Souris Valley United Way and the Minot Community.

	·····•
NAME	
ADDRESS	
CITY	
STATE, ZIP	
AGE (if under 18)	
PHONE	
	uld be injured. I am voluntarily participating in these activities with y risks of bodily injury or property damage, whether those risks are
be liable or responsible for any injuries sustained or damage the Souris Valley United Way and the Minot YMCA to particle hereby release and discharge the Minot YMCA and Souris Valincluding any actions, claims, or demands that I, my assigner representatives now have, or may have in the future for injuries.	and the Minot YMCA and any associated sponsors of this event shall not a to any equipment or property. As consideration for being permitted by pate in these activities and use the associated premises and facilities, I alley United Way from any and all liability of every kind and nature, es, heirs, distributes, guardians, next of kin, spouse and legal ary or property damage related to my participation in these activities; the se activities or not, and however caused; or the condition of the then participating in the activities.
	ffiliated organizations, and their legal representatives, successors and uce, or cause to be used, published and reproduced, pictures, text in video, newspapers or otherwise.
$\begin{tabular}{ll} \hline \end{tabular} \begin{tabular}{ll} \hline t$	r liability for, any use for advertising, illustration, publication in form of without restriction as to frequency or duration. I agree that photos, s Valley United Way. I waive any right to inspect or approve the finished ed in connection therewith.
	DERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LEY UNITED WAY, AND MINOT YMCA AND SIGN IT OF MY OWN FREE
Participant's signature	
Parent/guardian's signature (if minor)	