

WAIVER AND RELEASE FROM LIABILITY

This KIDSTEADER RELEASE AND WAIVER OF LIABILITY is made freely, knowingly, voluntarily and without duress.

In exchange for participation in the activity of Kidsteaders Homestead Classes organized by Homesteaders of America, PO Box 555, Rixeyville, Virginia 22737 and/or use of the property, facilities and services of Homesteaders of America,

I, _____, (“Guardian”) residing at

(address)

agree for myself and for the members of my family to the following:

1. Guardian herby grants permission for Youth to participate in activities and events for, on behalf of, involving, relating to, or in connection with Homesteaders of America. Guardian and Youth herby release to and authorize Homesteaders of America to produce, reproduce, broadcast, and otherwise use media in any form in connection with Youth’s attendance at or participation in Kidsteader Classes without compensations, for an unlimited duration.

Child’s Name	DOB	Allergies/Medical/Special Needs

2. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by Homesteaders of America, or the employees, representatives or agents of Homesteaders of America.
3. To release forever discharge and agree to hold harmless Homesteaders of America, its members and volunteers thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said person is participating in the above-described activity. The undersigned further hereby agrees to hold harmless and indemnify Homesteaders of America, its directors, members, employees and agents for any liability sustained by said participant.
4. To reimburse Homesteaders of America for any and all damages caused to the facilities and/or the equipment therein inflicted either by accident or malice.
5. To the administration of first-aid and/or doctor’s care, or any other form of medical treatment necessitated by illness or injury that may require the same. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify Homesteaders of America, its directors, members, employees and agents from any acts of malfeasance, and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.
6. I do not hold Homesteaders of America responsible if myself or any of my family members contract COVID-19 or any other illness while participating in activities related to the conference that result in illness, death, or bodily harm.
7. **EMERGENCY CONTACT.** In case of emergency, please call _____ (cell phone number)

Relationship: _____

Signature of Guardian: _____

Printed: _____

Date: _____