

# Mayor's Youth Council Youth Fitness Challenge Parental Consent Waiver



I hereby waive and release any and all rights, causes of action, and claims for damages I may have against the City of Boston, the Mayor's Youth Council & Youthline, Boston Centers for Youth & Families (BCYF), and any and all other associated individuals or organizations, for any and all personal injuries or property damage resulting from my participation in the Mayor's Youth Council Youth Fitness Challenge.

I, the undersigned parent or guardian of [ \_\_\_\_\_ ], a minor, hereby consent to his/her Mayor's Youth Council Youth Fitness Challenge participation and waive and release any and all rights, causes of action and claims for damages I may have against the City of Boston, the Mayor's Youth Council & Youthline, BCYF, and any and all other associated individuals or organizations, arising out of any and all personal injuries or property damage which I may now or hereafter have as the parent or guardian of said minor, and also all rights, causes of action, and claims which said minor has or may acquire resulting from his/her participation in the program.

I give consent for me/my child to be administered first aid and to be treated by an emergency medical technician-paramedic, nurse or physician. Any follow up medical attention may be given at a local hospital and transportation to a Boston hospital is authorized. I give my consent for photographs, audiotapes, and video records of me/my child to be used by the Mayor's Youth Council & Youthline and BCYF for publicity purposes. I also agree to allow the Mayor's Youth Council & Youthline and BCYF to use photographs, audiotapes, video records or other work produced by the member for publicity purposes.

*Please print clearly:*

**Student's Name:** \_\_\_\_\_

**Parent or Guardian:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

