

Waiver Form

By signing this waiver, I signify that I have read it in its entirety. I and anyone entitled to act on my behalf waive and relieved the Stanford Archery Program ("SAP"), Stanford University, the Stanford Archery coaches, instructors, team members, staffers and counselors, and any other parties connected with the event in any way from all claims or liabilities of any kind arising out of my participation in Stanford Archery Programs, ("Programs") even though such claim or liability may arise out of the negligence or carelessness on the part of any person named in this waiver.

I agree that I am physically capable of participating in this event, that any equipment I may use to participate in the event is in working condition, that I will observe applicable Programs' rules. If I do not follow the rules of the Programs, I understand that I may be removed from the Programs.

I hereby grant Stanford Archery Program permission to make still or motion pictures and sound recordings, separately or in combination, and also give a production company approved by Stanford Archery Program permission to use the finished silent or sound pictures, and/or sound recordings as deemed necessary. Further, I so hereby relinquish to Stanford Archery Program all rights, title, interest in, and income from the finished sound or silent motion pictures, still pictures, and/or sound recordings, negatives, prints, reproductions, and copies of the originals, negatives, recording duplicates and prints, and further grant Stanford Archery Program the right to give, sell, transfer, and/or exhibit the same to any individual, business firm, publication, television station, radio station or network, or governmental agency, or to any of their assignees, without payment or other consideration to me or my agents. My agreement to perform under camera, lighting and stated conditions is voluntary, and I do hereby waive all personal claims, causes of action, or damages against Stanford Archery Program, and the employees thereof, arising from a performance, appearance or participation.

Signature of parent or guardian:

Parent Signature: _____ Date: _____