**First Book**
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# First Book Liability and Media Release Form

We ask everyone who participates in a First Book event to execute the following release.

This Release and Waiver of Liability is executed by _____ (child's name, the "Participant") in favor of First Book, a nonprofit organization, its members, officers, employees, and agents, and those of its affiliates, sponsors, contributors, and their affiliated companies for this event (collectively, "First Book").

The Participant freely executes this Release under the following terms:

**1. Waiver and Release.** Participant does hereby release and forever discharge and hold harmless First Book and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or equity.

**2. Medical Treatment.** Except as otherwise agreed to by First Book in writing, the Participant does hereby release and forever discharge First Book from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with his or her participation in a First Book event.

**3. Photographic and Media Release.** The Participant does hereby grant and convey to First Book all right, title, and interest in any and all photographic images, video or audio recordings, artwork, letters, or anecdotes gathered by First Book during the Participant's participation in a First Book event, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. First Book will have the right to edit and use these materials for purposes of program promotion, advertising, or public relations.

**4. Minors.** If the Participant is a minor (a person under 18 years of age), the signature/permission supplied by the parent or legal guardian shall constitute on behalf of the minor a release and waiver of liability to the full extent set forth above.

**Accepted and Agreed:**

_____ _____
Child's Name (Participant) Signature of Parent or Legal Guardian (if Participant under 18)

_____
Address

_____
City, State or Province, Zip code

Phone _____ E-mail _____