



GIRL SCOUTS OF HISTORIC GEORGIA, INC.

QuestFest®/BRIDGING SAVANNAH'S BRIDGE EVENT RELEASE AND WAIVER OF LIABILITY

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I, on behalf of myself or as parent/guardian/legal representative on behalf of the minor(s) identified below, acknowledge, and agree that participating in the QuestFest® Event/Bridging Savannah's Bridge Event can be physically and mentally challenging. By my signature below, I certify that I or any minor(s) identified below is medically able to perform this event. I agree to abide by any decision of any official, including but not limited to medical or law enforcement personnel, relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever.

I further assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, the effects of weather including high heat and/or humidity, traffic, and road conditions, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of Girl Scouts of Historic Georgia, Inc.'s allowing participation in the event, I, for myself or as parent/guardian/legal representative on behalf of the minor(s) identified below, waive and release the Girl Scouts of Historic Georgia, Inc., its representatives, agents, employees, officers, directors, successors and assigns, from any and all actions, causes of action, suits of any type or nature whatsoever, whether in law or in equity, arising out of or relating to any loss, damage, or injury, including death, that may be sustained by the undersigned or minor identified below.

The undersigned further expressly agrees that the foregoing release and waiver agreement is intended to be as broad and inclusive as permitted by the laws of the State of Georgia and that if any portion hereof is held invalid, it is agreed that the balance hereof shall continue in full force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT, and further agrees that no oral representations or statements or inducements, apart from the foregoing written agreement, have been made.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian or Legal Representative on behalf of

\_\_\_\_\_  
Date

- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor
- \_\_\_\_\_, a minor