## Minor Waiver/Release RELEASE OF LIABILITY FOR MINOR PARTICIPANTS **READ BEFORE SIGNING**

IN CONSIDERATION OF	, my child, being allowed to participate in any way
in the Buffalo Bomb Squad/ Buffalo Bomb Squa appreciates, and agrees that:	d Sports Inc. related events and activities, the undersigned acknowledges,
1. The risk of injury to my child/ward from the a for permanent disability and death, and while rul personal discipline may reduce this risk, the risk	
	ARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, FROM THE NEGLIGENCE OF THE RELEASEES or others, and articipation; and,
	s stated and customary terms and conditions for t concern in my child/ward's readiness for participation and/or in the n the participation and bring such attention of the nearest official
kin, HEREBY RELEASE AND HOLD HARMI officers, officials, agents, employees, volunteers, applicable, owners and lessors of premises used ALL INJURY, DISABILITY, DEATH, or loss of the control of the contr	on behalf of my/our heirs, assigns, personal representatives and next of LESS Buffalo Bomb Squad/ Buffalo Bomb Squad Sports Inc; its directors, other participants, sponsoring agencies, sponsors, advertisers, and if to conduct the event ("Releasees"), WITH RESPECT TO ANY AND or damage to person or property incident to my child/ward's involvement ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR law.
	MNIFY AND HOLD HARMLESS all the above releasees from any and ment or participation in these programs, EVEN IF ARISING FROM
UNDERSTAND ITS TERMS, UNDERSTAN	ITY AND ASSUMPTION OF RISK AGREEMENT, FULLY D THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY WITHOUT ANY INDUCEMENT.
(PARENT/GUARDIAN SIGNATURE)	(PRINT NAME)
Date Signed:	
UNDERSTANDING OF RISK I understand the seriousness of the risks involved adhering to rules and regulation, and accept them	d in participating in this program, my personal responsibilities for as a participant.
(PARTICIPANT SIGNATURE)	(PRINT NAME)
Date Signed:	