

SUBMIT ALL FORMS & PAYMENT BY JUNE 8, 2018



TO ATTEND MORRIS KNOLLS PROJECT GRADUATION 2018:

1. Complete all info on this page and sign the MK Project Grad waiver on reverse side
2. Sign the Coastal Sports Facility waiver on the separate sheet
3. RETURN BOTH PAGES and \$65 check made payable to Morris Knolls Project Graduation:
 1. MK main office in envelope marked PROJECT GRADUATION or
 2. Mail to: MK Proj Grad, P.O. Box 1001, Denville, NJ 07834

Graduate's Name:

Graduate's Address:

Graduate's Cell Phone:

Parent/Guardian #1 Name:

Parent/Guardian #1 Email:

Parent/Guardian #1 Cell Phone:

Parent/Guardian #2 Name:

Parent/Guardian #2 Email:

Parent/Guardian #2 Cell Phone:

Health/Allergy info we should be aware of:

- Yes, I have read the event rules included in this mailing
- Yes, I have signed the waiver on the reverse side. No student will be permitted into the event without a signed waiver

MUST SIGN WAIVER ON REVERSE >

Any questions? Email mkpgc18@gmail.com

RETURN THIS COMPLETED FORM



HOLD HARMLESS AGREEMENT for Student Participation in the MORRIS KNOLLS PROJECT GRADUATION 2018:

As a Morris Knolls 2018 Graduate, I am requesting that I, _____ be able to attend and participate the 2018 MK Project Graduation activities. As parent/legal guardian of _____ I give permission for my child to participate the 2018 MK Project Graduation activities.

I understand that this is not a sponsored Morris Knolls High School or Morris Hills Regional District event. I further understand that this Hold Harmless Agreement means that I will not hold MORRIS Knolls High School, Morris Regional district, or volunteers of the Project Graduation committee including those organizing and supervising the 2018 Project Graduation Event, liable for any and all loss, claim, injury, damage or liability sustained or incurred by my children or his/her project resulting therefrom. This includes travel to/from the event, attendance at the event, and any and all related activities. I further understand the danger of physical stress, strain, or injury from the activities offered at Project Graduation and accept full responsibility for my child's use of any and all apparatus, facility, privilege, and/or service offered at Project Graduation.

PRINT NAME OF MK 2018 SENIOR: _____

SIGNATURE OF MK 2018 SENIOR: _____

DATE: _____

PRINT NAME OF PARENT/LEGAL GUARDIAN _____

SIGNATURE OF PARENT/LEGAL GUARDIAN _____

DATE: _____

RETURN THIS SHEET WITH SIGNUP FORM & PAYMENT TO:

Morris Knolls Project Graduation, P.O. Box 1001, Denville, NJ 07834

Any questions? Email mkpgc18@gmail.com



Release and Waiver of Liability and Indemnity Agreement

In consideration of being permitted to participate in any Coastal Sports NJ (CSNJ) Program at 22 Madison Rd. or 5 Gardner Rd in Fairfield, NJ, the parent(s) and/or legal guardian(s) of the participant or named participant(s) below agree:

1. The parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating in the CSNJ program or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agreed that, if at any time, I feel anything to be UNSAFE, I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.

2. I/WE fully understand and acknowledge that:

- (a) There are risks and dangers associated with participation in programs and activities which could result in bodily injury, partial and/or total disability, paralysis and death.
- (b) The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.
- (c) These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releases named below.
- (d) There may be other risks not known to us or are not reasonably foreseeable at his time.
- (e) CSNJ may take pictures, video, and may utilize them in printed materials, display in either facility, or display on their website and social media channels. At no time will a person's name be posted without their written consent.

3. I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releases named below.

4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the CSNJ facility used by the participant, including its owners, managers, promoters, lessees of premises used to conduct any program, premises and event inspectors, underwriters, and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding any CSNJ facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Release"...FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next to kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.

5. I/WE HEREBY acknowledge that these activities are potentially dangerous and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.

6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.

7. On behalf of the participant and individually, the undersigned partner(s) and/or legal guardian(s) for the participant executes this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releases, the parent(s) and/or legal guardian(s) will reimburse the releasee for any money which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

CSNJ Facility: 22 Madison Rd (X)

Parent or Guardian Name (print): _____

Parent/Guardian/Participant Signature: _____

Email of Parent: _____

Printed Name of Participant _____

Address of Participant: _____

Phone Number of Participant: _____

Received by _____
Registrar Signature