



Waiver for Minors

under 18 years old

**NOTE: Children from the same family
may be listed on one waiver**

Minor Waiver of Liability for Participation in CERT Basic Training & Graduation Drill

I acknowledge that _____ (name of minor) has voluntarily agreed to participate in the City of Walnut Creek's "Community Emergency Response Team (CERT) Basic Training classes & Graduation Drill," which are scheduled to take place on dates and at locations listed in the attached schedule. As minor's parent or guardian, I am aware that there are certain risks associated with participating in the training classes and the drill, including but not limited to risk of physical injury, personal property damage, physical exertion, and outdoor exposure. In acknowledging these risks and in consideration for participating in the training classes and the drill, I, the parent or guardian of minor, intending to be legally bound, do hereby for minor, myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against the City of Walnut Creek, its employees, officers, officials, representatives, independent contractors, or volunteers for any and all claims of personal injuries (including death), damages, or property damage that may occur as a result of participating in the training classes and the drill, even though the liability may arise out of the active or passive negligence on the part of the persons or entities mentioned above. Further, I will assume any medical and emergency expenses in the event of an accident or other incapacity or injury resulting from or occurring from minor's participation in the training classes and the drill.

I also understand that photographs or videos may be taken of minor during minor's participation in the drill and that these photographs may be used by the City of Walnut Creek for the purpose of promoting this drill. I hereby consent to use of any photographs or video taken of minor during the training classes and the drill.

Parent/Guardian's Signature: _____ Date: _____

Print Name: _____

Emergency Contact Information

Name: _____

Address: _____

Phone (best to contact): _____

Relation to volunteer: _____