

MARYLAND STATE PTA
5 Central Avenue, Glen Burnie, MD 21061-3441
ADULT PARTICIPANT'S WAIVER
(For Those 18 y/o and over)

In the consideration of the acceptance of my entry in the
_ Western School of Technology & Environmental Science PTSA _ Catonsville, MD _
Name of PTA Unit City

Date of Event _____

Name of Event _____

I the undersigned participant, intending to be legally bound, do hereby for myself and heirs, executors, administrators and assigns, forever waive, release and discharge any and all rights, claims and actions for damages that I may have, or that may hereafter accrue to me against the Maryland PTA including all units and councils, and all of their officers, directors, members and volunteers.

I attest and verify that I am mentally & physically fit and able to participate in this event and acknowledge that I am aware of the inherent risks in participating in an athletic event of this type.

Signature Date

Print Name

Address City Phone

Maryland PTA Insurance and Loss Prevention Guide

I give BCPS, MDPTA, WSTES & WTPTSA, Inc., permission to use my likeness in any photographs and/or videos to use in any and all printed, visual, and electronic publications, demonstrations, and/or exhibits without compensation or intent of legal action. I understand and agree that this is a volunteer based event and my image(s) may or can be used to promote the school and this PTSA activity and event.