

**The Greater Phoenix Orienteering Club**

**Waiver and Permission to Participate**

**Must be signed by parent or guardian for each applicant under the age of 18**

In consideration of the acceptance of this application, intending to be legally bound, I do hereby for the applicant, his parents/guardians, heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the United States Orienteering Federation/Orienteering USA, the Greater Phoenix Orienteering Club and its members, the school and/or scout group sponsoring this membership, and other public and private land owners and lessees, their representatives, successors, and assigns for any injuries resulting from events on the dates listed below. I further attest that I recognize that participation in orienteering events may pose a risk of injury. The risks may cause minor injuries, serious injuries or in extreme circumstances even death. I also understand that the risks associated with orienteering may be caused by the participant through his or her own actions, or inaction, or the actions or inaction of others participating in the activity and that there may be other risks either not known or not readily foreseeable. I also attest that that my son or daughter is physically fit, able and qualified to participate in orienteering events.

This waiver is for any event hosted in part or in full by the Greater Phoenix Orienteering Club. If I determine after one of the GPHXO events that I have concern about further participation by my child, I will not allow my child to participate in future events.

**All participants under the age of 14 must be accompanied by an adult to and from the event site. Participants between the ages 10 and 18 may go out on a course alone with the written permission (this form) of a parent or guardian. Participants under the age of 10 must be accompanied by a parent, guardian, or approved adult at all times.**

Date \_\_\_\_\_

Name of underage applicant \_\_\_\_\_

Name of parent/guardian \_\_\_\_\_

SIGNATURE parent/guardian \_\_\_\_\_

Name(s) of approved adults to accompany children ages 9 and younger \_\_\_\_\_

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