

Participant signature: \_\_\_ (18 years or older or parent/guardian)

Printed name and relationship to participant: \_\_

## M-NASR Group Home/Agency Participant Waiver

This waiver must be on file for each Group Home/Agency participant in order to participate in M-NASR programs utilizing the Group Home Roster and Registration Form. Please note that this waiver:

- 1. Must be signed by a legal guardian or participant if own legal guardian
- 2. Is valid through and including December 1, 2023-December 31, 2025
- 3. Allows the representative from the Group Home/Agency to register individuals seasonally for M-NASR programs

Participant name:	Agency name:
Current address:	
	M-NASR Waiver and Release of All Claims
IMPORTANT INFORMATION Please recognize that M-NASR does not could make program fees prohibitive an registering themselves or a family men participants must recognize that there is participating in these activities Participar rules, policies, procedures and methods continually strives to reduce such risks participants' safety. However, participar inherent risk of injury when choosing to minor child/ward are physically fit and/of the participant is pregnant, disabled in a undertaking any physical activity. I under instructor's directions and movements safety.	at carry medical accident insurance for injuries sustained in its programs or at its facilities. The cost of such d could result in the reduction or elimination of certain programs and facilities. Therefore, each person ober should review their own health insurance policy for coverage. Participants and parents of an inherent risk of injury when choosing to participate in recreation activities. By signing below and into and Parents/Guardians of participants hereby affirm and acknowledge that they have reviewed these and agree that these demonstrate a conscious regard for the safety of the Participant. M-NASR and insists that all participants follow safety rules and instructions that are designed to protect the ats and parents/guardians of minors registering for this program/activity must recognize that there is an participate in recreational activities/program. You are solely responsible for determining if you or your radequately skilled for the activities contemplated by this agreement. It is always advisable, especially if any way or has recently suffered an illness, injury or impairment, to consult a physician before estand that it is my responsibility to ensure there is adequate space for my child/ward to follow the afely and without the possibility of tripping or colliding with objects, furniture, walls, stairwells, or any injury, and that each parent/guardian is solely responsible for assessing if they can participate safely in
and proper preparation, instruction, mer recreational activity. All hazards and da exist due to inclement weather, slips an defects, inadequate or defective equipment in this regard, it is impossible for the M-before starting this virtual or in-person ror shortness of breath at any time while recreational programming, you do so at	hallenge and engage the physical, mental, and emotional resources of each participant. Despite careful dical advice, conditioning and equipment, there is still a risk of serious injury when participating in any ngers cannot be foreseen. Depending on the particular activity, certain risks, dangers and injuries may d falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises ment, inadequate supervision, instruction or officiating, and other risks inherent to the particular activity. NASR to guarantee absolute safety. You should consult your physician or other health care professional ecreational program to determine if it is right for your needs. If you experience faintness, dizziness, pain participating you should stop immediately. If you choose to participate with this virtual or in-person your own risk and acknowledge that the activity/program carries an inherent risk of physical injuries. To not its affiliates disclaim any and all liability in connection with the activity/program in this virtual or in-ns and advice provided.
and legal liability and waiving and relea of participating in any and all activities operations, when provided). I recognize and I voluntarily agree to assume the fusustain as a result of said participation. my child/ward) as a result of participati *** I understand that unless specifically rights to privacy will be protected in all participation.	AND ASSUMPTION OF RISK aware that in signing up and participating in this program/activity, you will be expressly assuming the risk sing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result connected with and associated with this program/activity (including transportation services and vehicle and acknowledge that there are certain risks of physical injury to participants in this program/activity, all risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or ng in this program/activity against M-NASR, including its officials, agents, volunteers and employees. stated in writing at the time of registration, photographs of participants may be taken, I realize that our photographs and publications of M-NASR activities. I have been made to understand that no personal etowns will be released under any circumstances and this meets with my approval.
	above important information, warning of risk, assumption of risk and waiver and release of all ctronically, my electronic signature shall substitute for and have the same legal effect as an