



Release / Assumption of Risk / Consent to Medical Release

Member's Name: _____

I am aware that during any Impulse Youth Arts Organization, Rhythm Regiment Drum and Brass Corps (herein collectively referred to as "IYAO") activities, including without limitation competitions, rehearsals and trips, certain hazards may occur, including but not limited to, the hazards of accidents or illness, which may occur at places without medical facilities, hazards created by the forces of nature and hazards of travel by air, train, bus, automobile and other means, including walking.

I understand and do hereby assume all of the above-mentioned risks and will hold IYAO harmless from any and all liability whatsoever which may arise out of participation in any activities arranged for the participant by IYAO, or during any travel in private vehicles to and from any IYAO rehearsals or functions. This document shall serve as a release of all claims for personal injury to the participant and an assumption of risk binding upon my heirs, executor and administrators, and all members of my family.

In an event of participant's illness, I do hereby authorize any of the directors, officers, managers or chaperones of IYAO who are present at the place of occurrence to consent to whatever x-ray examination, anesthetic, medical, surgical, or dental diagnosis, treatment, and/or hospital care that may be considered necessary for the participant in the best judgment of the attending physician, surgeon, or dentist and to be performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services. I recognize that the directors, officers, managers or chaperones consenting to such health care may reasonably and in good faith rely upon the advice furnished to him or her by the attending licensed health care provider(s).

I understand that "IYAO" may not provide transportation to a scheduled event or trip. All members who use private transportation as part of a trip or tour shall understand that they waive claims against "IYAO" in the event of accident, injury or death.

INDEMNIFICATION: I further agree to hold harmless, defend, and indemnify "IYAO" from any and all liability as defined above, resulting from, or in any manner arising out of any negligence of the member during a scheduled "IYAO" activity.

I have read the Release of Liability, Assumption of Risk and Medical Consent. I agree voluntarily with full knowledge of the significance of these terms.

Signature of member

Date

Signature of parent or guardian if member is a minor

Date

Print Name or Parent or Guardian (if signed above)

Relationship