

PHOTO & GENERAL RELEASE FORM

(must be completed for each person over the age of 18)

Name

Home Address

City

State

Zip

Home Phone Number

Alternate Phone Number

Emergency Telephone Number

Please check here if you are over the age of 18.

The participant listed on this form will be attending () at ().

As the individual and on behalf of personal representatives and my heirs, I hereby voluntarily agree to release, waive, forever discharge, hold harmless, defend and indemnify Destination Imagination, Inc. () and their agents, officers, boards, volunteers and employees from any and all liability and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation in activities related to the tournament including travel to and from the event.

I also hereby grant permission for Destination Imagination, Inc. and () to publish images of activities and of me for the purpose of promoting Destination Imagination®. I grant this permission freely without reservation.

Signature of Participant

Date

Team Name

Challenge

Level

Team Number