I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereby referred to as the "Participant"), hereby consent to participate in the programs and activities organized by the Mentor Me Now Foundation (hereby referred to as the "Foundation").

I understand and acknowledge that my participation in the Foundation's programs may involve certain risks, including but not limited to physical injury, property damage, or emotional distress. I voluntarily assume all such risks and hereby release and discharge the Mentor Me Now Foundation, its directors, officers, employees, agents, volunteers, and affiliates from any and all claims, liabilities, or demands arising out of or in connection with my participation in the program and activities.

I understand that the Mentor Me Now Foundation may capture photographs, videos, or audio recordings during program activities. I hereby grant the Foundation and its affiliates the irrevocable right and permission to use such photographs, videos, or audio recordings in connection with promoting the Foundation's programs, events, and activities, without compensation to me.

I acknowledge and agree that any personal information provided by me will be collected and stored by the Mentor Me Now Foundation for the purpose of administering their programs and communicating with me regarding my participation. I understand that my personal information will be kept confidential and will only be shared with authorized personnel or as required by law.

I declare that I am in good health and that I have not been advised by a medical professional to refrain from participating in physical activities. I agree to abide by the rules and guidelines set forth by the Mentor Me Now Foundation and its representatives during my participation in their programs.

I further understand that this consent and release form shall be binding upon myself, my heirs, executors, administrators, and legal representatives.

This consent and release form shall be governed by and construed in accordance with the laws of the Nevada, US. Any dispute arising out of or relating to this form shall be subject to the exclusive jurisdiction of the courts of Nevada, US.

By signing below, I acknowledge that I have carefully read and understood the terms and conditions of this consent and release form, and that I voluntarily agree to be bound by them.

Participant's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian (if Participant is under 18 years old):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_