



Child(ren)'s Name:	Child(ren)'s Date of Birth:		
Address:	Phone:	Email:	
Emergency Contacts and Phone:	Medical Concerns/Allergies/Special Needs:		
My child(ren),, has permand events is a privilege, and not a right. I acknowledge that I such events and activities, rules of conduct set forth in the Vol	have spoken with my child about my chil	d's need to comply with the specific rules and	y child's participation in activities requirements established for
I also understand that events and activities may expose my chexpenses for any injuries that might occur to my child by reason		risk that may arise there from. I accept full res	sponsibility for all medical
I authorize Youth for Troops to transport my minor child in a version laws regarding riding in a motor vehicle and is expected to foll Youth for Troops's insurance does not cover damages arising negligence related to this activity. Any damages/harm resulting events, is hereby waived.	ow the directions provided by the driver a from, or related to, the operation of any p	and/or volunteer. The owner of the vehicle mus private vehicle, failure to follow the directed dri	st carry bodily injury insurance. iving route, or any personal
Initial Each Statement That Applies			
I authorize the Board or volunteers of Youth for Troops	to obtain medical/hospital treatment for th	ne above participant in the event of an emerge	ency.
I give permission for my child to transport him/herself to	and from activities and events.		
I give permission for my child to transport other minors t	to and from activities and events.		
I give permission for my child to ride in a vehicle to and	from the activities or events with another	minor.	
I give permission for my child to ride in a vehicle driven	by an adult volunteer or parent of anothe	r minor to activities and events.	
As a condition for the transportation received, I, for mys agents, officers, and volunteers from any claim that I might ha other forms of liability, including those based on negligence, ir Board, its Board members, directors, volunteers, and agents for sustain (a) arising out of my child's failure to comply with local damage or injury caused by my child; or, (c) arising out of a pattern indemnify and hold harmless the released parties from the released parties.	ve myself or that I could bring on my chile any manner arising out of transportation rom and against any and all claims, dema , state, and federal laws and Youth for Transport of the transport of transport of the transport of the transport of the transport of transport of the transport of transport	d's behalf with regard to any damages, deman n or participation. By signing this form, I here ands, actions, complaints, suits, or other forms roops policies and procedures, and the Code of r's operation of a motor vehicle in relation to ac	nds, actions, complaints, suits or by release Youth for Troops, its s of liability that any of them may of Conduct; (b) arising out of any ctivities and events. I also agree
Photographs and video footage of participants for use in utilize photographs and video footage of the participant for the their appearance in brochures, websites, and media releases) required by law.	purpose of promoting and publicizing Yo	outh for Troops, programs, events, and activitie	es (including but not limited to
This permission shall stay in effect until revoked in writing.			
I also understand that I have the ability to refuse to sign this for	orm. In addition, that if I refuse to sign, my	/ child will not be permitted to participate in the	e activities and events.
Parent/Guardian Name: For further information or registration: visit www.youthfortroops	Parent/Guardian Signature: s.org or contact Youth for Troops at youth		Date: