



*Right to Life – LIFESPAN Educational Fund*

**2020 “MOVEMENT IN MOTION” Youth Bus Trip**

**Liability Release Form:**  
**Release of all Claims –ALL BUSES**

Name of Activity: 2020 “*Movement in Motion*” Youth Bus Trip for the annual March for Life to Washington, DC, sponsored by *Right to Life –LIFESPAN Educational Fund*

Dates of Activity: Thursday, January 23<sup>rd</sup> – Sunday, January 26<sup>th</sup>, 2020

The undersigned do hereby release, forever discharge and agree to hold harmless *Right to Life – LIFESPAN Educational Fund*, a Michigan non-profit corporation, hereafter *LIFESPAN Educational Fund*, from and against any and all liability, claims, demands, lawsuits and expenses of any kind arising from personal injury, sickness, death or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or participant. The undersigned and/or participant further agrees to indemnify and hold *LIFESPAN Educational Fund*, respective members, director, employees, and volunteers (collectively, the “Indemnities”) harmless from and against any and all claims, demands, actions, lawsuits, and liabilities, including attorney fees and expenses and costs sustained by the Indemnities as a result of negligent, willful or intentional acts of the undersigned and/or participant.

*If participant is under 18 years of age*, I (we) the parent(s) or legal guardian(s) of the participant, do hereby grant permission for my (our) child to participate fully in the March for Life and all of its activities as described in the Registration Form. In the event of a medical incident, if I (we) are unable to be contacted, I (we) hereby authorize medical treatment, including but not limited to emergency surgery and I (we) fully and completely assume all responsibility for all medical bills.

*Further*, should it be necessary for the participant to return home at a time other than scheduled due to medical reasons, disciplinary action or otherwise, I (we) assume all responsibility and transportation costs.

***This form MUST BE filled out by EACH participant and returned to the LIFESPAN office in Troy by October 31, 2019 (see further details below). If participant is under 18, parent or legal guardian must sign. PLEASE PRINT CLEARLY!***

Printed Name: _____	Age: _____	Sex: F _____ M _____
Street Address/P.O. Box: _____		
City: _____	State: _____	Zip with plus 4 digits: _____ - _____
Participant’s E-Mail: _____	Parent’s E-mail: _____	
Home Phone: _____	Participant’s cell phone: _____	
Parent or Legal Guardian Signature: _____		
Printed Name of Parent or Legal Guardian: _____		
Participant Signature (if 18 or older): _____		
Church/Parish/School/College/Group Name: _____		
Seat with Certain Person (optional): _____		
Date Signed: _____		
<i>Right to Life – LIFESPAN</i> President, Diane Fagelman: <u><i>Diane Fagelman</i></u>		

This form must be submitted with: Non-refundable deposit of \$50.00, Check List, Liability Release Form, Medical Form, Image Waiver Agreement, Rules of Conduct or Jr./Assistant/Chaperone/Captain Agreement Form and Bus Pick Up/Drop Off & Parking Form **NO LATER THAN OCTOBER 31, 2019!**

***Note: If you do not pay the full cost up front when you register, the remaining balance is due BY OCTOBER 31<sup>st</sup>. Please mark your calendar because you will not receive a notice!***