



## CHILD/YOUTH ACTIVITY PROGRAM RELEASE FORM: FOR PARENT'S SIGNATURE

In consideration of my child being given the opportunity to participate in the **ROAD TO GIVE BALI 2025**, I hereby agree as follows:

- 1. I am aware, and represent that my child is aware, of the skills needed for, and I recognize, and represent that my child recognizes, the risks of injury or harm that may occur to my child as a result of my child's participation in the **ROAD TO GIVE BALI 2025**. I assume such risks on my own for myself and my child as a condition of my child's being permitted to participate in the **ROAD TO GIVE BALI 2025**.
- 2. For my child and for myself and for my child's heirs, successors and assigns, I hereby release and forever discharge the organizer and Marriott International, Inc. and its subsidiaries and affiliates, and their respective officers, directors, shareholders, agents, employees, successors and assigns from any and all actions, costs, suits, demands, claims, damages, losses and liabilities (including reasonable attorney's fees) of any type or kind whatsoever arising out of or caused by my child's participation in **ROAD TO GIVE BALI 2025**.
- 3. I hereby agree to indemnify, defend and hold harmless the organizer and Marriott International, Inc. and its subsidiaries and affiliates, and their respective officers, directors, shareholders, agents, employees, successors and assigns any and all actions, costs, suits, demands, claims, damages, losses and liabilities (including reasonable attorney's fees) of any type or kind whatsoever arising out of or caused by my child's participation in **ROAD TO GIVE BALI 2025**.

Child's Name:	B	irth Date:	Sex:
Parents Name:			
Medical Conditions Or Needs You Wan	t Property To Know A	About:	
Emergency Contact Name :			
Telephone and Cell Phone Numbers:			
Comments:			
	Parent's Signatur	·e:	
	Date:		