WAIVER OF LIABILITY

I,	I understand that in particle a watercraft, where hazards participating in the Flotilla	s exist, and I am aware of, and appreciate, the Event with knowledge of the dangers
· ·	d I agree to assume the full	Our Relations Journey have undertaken any responsibility for all risk of bodily injury, n the All Our Relations Flotilla.
		ent from any of the sponsors of the Flotilla ts for injury sustained and liability incurred
I understand that my name, photograph Flotilla Event. I consent to and authoritherewith.	•	used by the Organizations associated with the rights of privacy I have in connection
this form, understands and consents to	its terms, and authorizes my	or legal guardian has completely reviewed y participation by his/her signature below. Below supervised by an adult at all times before
By my signature, I hereby state that I u and voluntarily accept these risks.	nderstand the risks involved	d in participating in the Flotilla and willingly
Signature		Date
Parent/Guardian Signature (if under 18	()	Date