

Tokata Interactive Career Fair

WAIVER FORM



Participant name:

Participant Email:

I am aware of the risks that are connected to attending this event on this date. I agree to not hold accountable, or bring legal action, against the company or any of the organizations involved in our event. This waiver releases the company and the organizations from all liability relating to injuries that may occur on location before, during or after activity.

By signing this agreement, I agree to hold the company, and the organizations involved, entirely free from any liability, including financial responsibility, for injuries incurred regardless of the reasons or circumstances.

I acknowledge the potential risks involved with the activities. I certify that my participation is voluntary and that I have been made aware of the risks by signing this form. Additionally, I confirm I do not have any conditions that may increase my chances of injury.

I understand that I will need the permission of a parent or guardian to participate in all activities if I am under the age 18 years old.

Participant signature:

Date:

Guardian signature (If under 18):

Date:

THANK YOU FOR YOUR INFORMATION

