



Senior Leaders Program

Waiver, Indemnification and Release by Parent or Guardian of Minor Child

Waiver, Indemnification and Release

In consideration of participating in any manner in the Starfinder Senior Leaders Program, and on behalf of my minor child/children ("child") identified below, I, the undersigned parent and natural guardian or legal guardian represent that I am, in fact, acting in such capacity and agree to the following:

I release and hold harmless Starfinder from liability, for or from, any and all claims, including, but not limited to claims resulting in personal injury, property loss, accidents or illnesses (including death) arising from participation in the Starfinder Senior Leaders Program that I or my child may have, arising from or related to child's participation in

- i) any of the events or activities conducted by or for the benefit of the Starfinder Senior Leaders Program, and
- ii) while on the premises of Starfinder, or while using Starfinder-owned or operated facilities or equipment.

I do hereby represent that I am, in fact, acting with authority in the capacity of parent and natural guardian or legal guardian, and I, for myself, my heirs, personal representatives or assigns, do hereby release, discharge, waive and covenant not to sue, Starfinder, its board, officers, employees, students, and agents and agree to save, hold harmless, and indemnify Starfinder from all liability, loss, cost, claim or damage whatsoever which may be imposed because of any defect in or lack of such capacity to so act.

I also agree to indemnify and hold Starfinder, its board, officers, employees, students, and agents harmless from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney fees brought as a result of my child's participation in the Starfinder Senior Leaders Program, as set forth in paragraphs above, and to reimburse them for any such expenses incurred.

This waiver, indemnification and release agreement applies to any activity or action that takes place while my child or I are being transported to the Starfinder Senior Leaders Program, and is in effect at any time, I, or my child is present on-site or in any location associated with the Starfinder Senior Leaders Program

Permission Release

As the parent or legal guardian of child, I give permission for my child to participate in the Starfinder Senior Leaders Program. I understand that this permission slip includes my permission for my child to participate in all Starfinder Senior Leaders Program activities (including but not limited to: physical fitness, soccer competition, academic tutoring, mentorship meetings, community service, college trips, etc.). I understand that Starfinder assumes no responsibility for seeing to it that my child reports to activities at the Starfinder sponsored program, and I, on my own behalf and on behalf of my child, waive all claims for any liability arising or actions occurring before and after my child has reported to Starfinder program. I give permission to Starfinder to collect and record data, including academic grades, attendance, and fitness results about my child for program evaluation purposes. I give permission to



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Starfinder to periodically survey my child about his/her attitudes, behaviors, and knowledge for feedback and program evaluation purposes. I understand that all information obtained will remain private, and that any responses publicly reported will be grouped together with other participants. My child's identity shall be kept completely confidential when reporting.

Mentorship Acknowledgement

I fully understand that the Starfinder Senior Leaders Program has a mentorship component. A Senior Leaders Program Coach will be assigned to my child to serve as a mentor. Coaches/mentors will be screened (PA Child Abuse, PA Criminal History, and FBI Fingerprint) and trained before beginning the program. Coaches/mentors will be present with my child on core program days (2 days/wk) and will be expected to meet individually (20-45 minutes) on a monthly basis with my child on-site, off-site or via telephone. I understand that my child will participate in the mentorship component of the Starfinder Senior Leaders Program and that Starfinder will provide ongoing monitoring and support to mentors and my child for all mentoring activities.

Liability Release

I, the parent/guardian of child, agree that I and my child will abide by the rules of the Starfinder Senior Leaders Program and its affiliated organizations and sponsors. I, the parent/guardian of child has received a physical examination and has been found physically capable of participating in the Starfinder Senior Leaders Program. Recognizing the possibility of physical injury associated with soccer and physical activity and in consideration for Starfinder accepting my child for its program, I assume all risks and hazards incidental to athletic participation and hereby release, discharge and/or otherwise indemnify Starfinder, its officers, directors, coaches, sponsors, volunteers, agents and affiliates, against any claim by or on behalf of my child as a result of my child's participation in the Starfinder Senior Leaders Program.

Media Release

In consideration of the opportunity to participate in the Starfinder Senior Leaders program I, hereby give permission to Starfinder, its employees, affiliates, representatives, contractors, agents and members of the media to interview, audiotape, photograph, videotape, film, or capture by any other electronic means my child's image, voice and likeness, and, within its absolute discretion, to release, disseminate, or use, in any manner Starfinder sees fit including publications and web pages, the resulting images and testimonials and any other information contained therein for the purpose of demonstrating, advertising and promoting the objective of Starfinder. I understand that my child and I shall receive no compensation for his/her appearance on and participation in the Starfinder program. As parent/legal guardian of minor, I/we hereby assign to Starfinder all rights, including copyright, in any works created in whole or part by the minor while participating in the Starfinder Senior Leaders Program.



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Medical Treatment/Emergency Release

If my child is rendered incapable, I grant to Starfinder, its agents or officers, and any of its personnel full authority to take whatever action they feel is warranted under the circumstances regarding the participants' health and safety. Starfinder's personnel will attempt to seek the direct participation of the undersigned where possible. This authority will permit the Starfinder representative, at their discretion, in the event of injury or illness, to secure any necessary treatment for my child at any point for medical services, including hospitalization, injections, anesthesia or surgery and such medications as may be prescribed, when such treatment is recommended by a qualified physician or surgeon. I and my child agree to hold Starfinder and its representatives harmless for any decisions or actions taken in relation to obtaining medical care for my child. I understand that I will be notified as soon as possible in the event that an emergency arises requiring medical assistance and I assume all financial responsibility for any medical treatment (including transportation) for my child.

Acknowledgment of Understanding and Agreement

I have read this agreement, and fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Print Name of Senior Leader Program Applicant (Minor child)

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date