

PARISH/SCHOOL: \_\_\_\_\_

## COOKOFF WAIVER AND RELEASE FORM

In consideration of being allowed to participate in any way in any program, activity or event including but not limited to the \_\_\_\_\_ (parish/school) Cookoff (referred to herein as the "Program") sponsored by, performed by, or in any way involving \_\_\_\_\_ (parish/school) or The Roman Catholic Church of the Diocese of Houma-Thibodaux (collectively the "Indemnites"), I, as Participant, or if Participant is a minor, as parent or guardian of the minor Participant (herein referred to as "I") and intending to be legally bound do hereby acknowledge and agree to the following:

1. I hereby waive, discharge, and release any and all rights and claims for damages whether based upon negligence or any other theory of law, which I, or my child, heirs, agents, representatives, or assigns may have against the Indemnites, and their related entities, agents, representatives, assigns, or successors including, without limitation, any officers, directors, agents and/or employees of or associated with the Indemnites, the agencies or parishes in or through which the Program or events take place or are conducted, as well as any other person, entity or sponsor in any way related to the Program and any of their affiliates, agents, representatives, assigns, successors, officers, directors, shareholders, and employees, for any and all injuries or damages which I, or my child, may suffer while taking part in the Program.
2. I hereby assume any and all of the risks resulting from my, or my child's, participation in the Program and accept all responsibility for any resulting damage including, but not limited to, injury, permanent disability or death. **I HEREBY AGREE TO DEFEND, INDEMNIFY AND HOLD THE INDEMNITEES HARMLESS FROM AND AGAINST ALL LIABILITIES FOR ANY INJURY WHICH I MAY SUFFER ARISING OUT OF OR IN ANY WAY CONNECTED WITH MY PARTICIPATING IN THE PROGRAM.**
3. I hereby verify that I, or my child, am/is in good physical health and able to participate in and/or complete the Program.
4. I hereby agree and understand the contagious nature of COVID-19 and voluntarily assume the risk(s) of participation in the programs, services, events, or facilities operated by \_\_\_\_\_ (parish/school) or the Diocese of Houma-Thibodaux which include the risk of becoming exposed to or infected by COVID-19.
5. I have read and fully understood this Waiver and Release
6. I have knowingly and voluntarily agreed to this Waiver and Release.

### FOR PARENTS OF PARTICIPANTS UNDER THE AGE OF 18

I affirm and acknowledge that I, as parent/guardian with legal responsibility for the Participant, do consent and agree to his/her release as provided by the Waiver and Release herein,

### MEDIA/PHOTO WAIVER:

I hereby authorize and give my full consent to the Indemnites and their agents and assigns to take, copyright and/or publish any and all photographs, videotapes and/or film (the "Media") in which I, or my child, may appear while participating in the Program. I further authorize the Indemnites to transfer, use or cause to be used, the Media in any exhibitions, public displays, publications, commercials, art, advertising purposes, without limitations or reservations.

\_\_\_\_\_  
Printed Name of Participant

\_\_\_\_\_  
Signature of Participant, Parent or Legal Guardian

\_\_\_\_\_  
Date