



For office use only:
Received by: _____
Date: _____

2017 BRIGHTER FUTURE CHARITY PARTICIPANT REGISTRATION FORM

SPACE IS LIMITED, PLEASE RSVP VIA EMAIL OR PHONE AS SOON AS POSSIBLE

Email info@brighterfuturecharity.org or Call (800) 314-5908.

SEND THIS FORM IN AT LEAST ONE WEEK PRIOR TO EVENT

EVENT DATE: _____
TIME: _____
LOCATION: _____
PARTICIPANT FEE: **\$50**

Participant Name: _____

Parent/Caregiver Name: _____

Address _____ City _____ Zip _____

Daytime Phone () _____ Evening Phone () _____

Email: _____

Participant Website: _____

PREFERRED PAYMENT OPTION: \$50 Participant Fee

01. PayPal fee to paypal.me/brighterfuturech/50

02. Take a picture of this form and send to info@brighterfuturecharity.org

SECONDARY PAYMENT OPTION: \$50 Participant Fee

01. Write Check to "Brighter Future Charity"

02. Send this form to:

*Attention: Brighter Future Charity
1976 S. La Cienega Blvd. #C772, Los Angeles, CA 90034*

**WAIVER AND RELEASE OF LIABILITY,
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

2017 BRIGHTER FUTURE CHARITY

(Form must be signed by the parent/caregiver on behalf of the participant)

In consideration of the risk of injury while participating in the event named above, and consideration for the right to participate in the event named above, I hereby, for myself, my heirs, executors, administrators, assigns or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or cause of action of any kind whatsoever arising out of my participation in the event named above and do hereby release and forever discharge BRIGHTER FUTURE CHARITY located at 1976 La Cienga Blvd, #C772, Los Angeles CA 90034, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the event named above, including traveling to and from the event named above.

I AM VOLUNTARILY PARTICIPATING IN THE EVENT NAMED ABOVE AND I AM PARTICIPATING IN THE EVENT NAMED ABOVE ENTIRELY AT MY OWN RISK. I ASSUME ALL RELEATED RISKS, BOTH KNOW AND UNKOWN TO ME.

I acknowledge that I have carefully read this “WAIVER AND RELEASE” and fully understand that it is a RELEASE OF LIABILITY. I expressly agree to release and discharge BRIGHTER FUTURE CHARITY and all its affiliates from any and all claims or causes of action and I agree to voluntarily give up or waive any right that I otherwise have to bring a legal action against BRIGHTER FUTURE CHARITY for personal injury and property damage.

Participant Name

Parent/Caregiver Name

Parent/Caregiver Signature

Date