

**Rhode Island National Guard
Family Assistance Center
705 New London Avenue
Cranston, Rhode Island 02920**

**RELEASE AND HOLD HARMLESS AGREEMENT
AND
PARENTAL/LEGAL GUARDIAN CONSENT
RELEASE AND HOLD HARMLESS AGREEMENT**

The undersigned _____ and/or the undersigned parent/legal guardian of _____ hereby consents to his/her attendance and participation in the Civil Air Patrol Encampment 12-19 April 2008. In connection with his/her participation in this program, I consent to his/her participation in any sanctioned events to include transportation by government vehicle, use of the facilities at Camp Fogarty, East Greenwich, RI to include the rappel tower.

I, for myself and for said child/ward, hereby release the Rhode Island National Guard, the State of Rhode Island, the United States of America, their agents, servants, and/or employees from any and all claims, demands, losses, expenses, actions or causes of action, damages for injury to property or personal injuries including death, from any cause whatsoever, including negligent, intentional, reckless, willful or wanton conduct, arising out of or in any way relating to said child/ward's participation in the course and/or during transportation.

I further agree, for myself, my heirs, successors, assigns, personal representatives, to defend, indemnify and hold harmless the Rhode Island National Guard, the State of Rhode Island, the United States of America, their agents, servants and/or employees for any claim, action, cause of action, award, or judgment made by or on behalf of said child/ward in connection with his/her participation in the course and/or transportation in connection therewith.

I HAVE READ THE PRECEEDING PARENTAL CONSENT RELEASE AND HOLD HARMLESS AGREEMENT, UNDERSTAND ITS CONTENTS AND ACKNOWLEDGE THAT IT IS BINDING UPON ME, MY CHILD/WARD, OUR HEIRS, SUCCESSORS, ASSIGNS, AND PERSONAL REPRESENTATIVES.

Executed at _____, Rhode Island, on this _____ day of _____, 2008.

Name _____ Witness _____

Signature _____ Witness Signature _____

Address _____ Participant Signature _____

City and State _____ Participant Printed Name _____

Home Phone _____