



# FORM B 1– Delegate, Coach & Unified Partner Release Minor

## Release Form for Minor Unified Partners

I am the parent/guardian of \_\_\_\_\_, (the Unified Partner), on whose behalf I have submitted the attached application for participation in the 2013 Special Olympics World Winter Games (Games). The United Partner has my permission to participate in Games-related activities.

I hereby authorize, without compensation to me or the Unified Partner, Special Olympics, Inc. (SOI) and the 2013 Special Olympics World Winter Games (GOC) (collectively, “Special Olympics”), both during and any time after the Games to use, and license others to use, the Unified Partner’s name, voice, likeness, statements or words in television, radio, film, newspapers, magazine, on the Internet or any other media, in any form, for the purpose of publicizing, promoting, advertising or communicating the purposes and activities of Special Olympics and/or applying for funds to support those purposes and activities. **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Waiver & Release

I fully understand the risks involved with participation in the Games and I fully accept and assume all such risks and all responsibility for losses, costs, and damages the Unified Partner may incur as a result of the Unified Partner’s participation in the Games. I further understand that Special Olympics, Inc. will own the information I provide in the registration materials and may provide it to other entities as Special Olympics, Inc. deems necessary to conduct the Games.

I hereby release, discharge, and covenant not to sue SOI, the GOC , their respective administrators, directors, agents, officers, volunteers, and employees, and other participants (“Releasees”) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on the Unified Partner’s behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which I may incur as the result of such claim.

I have read this **Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement**, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I agree to abide by the Coaches Code of Conduct during the Games. If, during the Unified Partner’s participation in Special Olympics activities, the Unified Partner should need emergency medical treatment, and I am not able to give my consent or make arrangements for treatment, I authorize Special Olympics to take whatever measures it deems advisable to protect my health and well-being, including hospitalization if necessary. **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I understand that SOI is collecting my personal information as provided by me through this registration packet. I further understand and acknowledge that SOI will disclose my personal information, including the information collected through this registration material, to the GOC and other entities as SOI deems necessary to conduct the Games and provide for the minor Athlete’s health and safety at the Games and that either SOI or the GOC will input the personal information I provide into a computerized database that will be maintained by SOI after the Games end. I further understand that SOI and the GOC will use the information provided by me to conduct the Games, including for the following or similar purposes: 1) compiling results of the Games for SOI, the media and the public (including via a Web site that may provide certain information about me and video or pictures of me participating at the Games); 2) verifying participation in the Games; 3) conducting training on divisioning; conducting statistical analysis; 4) providing Games related services, such as housing, transportation, meals and medical and 5) protect the minor Athletes health and safety by providing it to medical personnel, hospitals, or insurers.. I acknowledge and understand that the GOC may disclose my personal information to certain government authorities for the purpose of obtaining any required visas so that I may travel to United States.

\_\_\_\_\_  
**Printed Name of Parent or Guardian**

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Date**