KEEP GASTONIA BEAUTIFUL, INC.
KEEP AMERICA BEAUTIFUL AFFILIATE

Keep Gastonia Beautiful Participant Waiver/Youth Participation Release Form

All participants must sign a copy of this form

Name of Organization:_____

I/We understand that I/We, and all parties accompanying me, are undertaking this form of activity at our own risk. I/We understand that there are dangers inherent in cleaning up our highways and waterways including, but not limited to, bodily injury, disability and death. I am fully aware of these dangers, as well as other unnamed risks for which I accept the legal and financial responsibility therefore, for myself, for anyone accompanying me any minor entrusted to my care, I agree to dress appropriately for this activity and to require anyone accompanying me to do the same.

For myself, my heirs, and assigns, I do hereby release Keep Gastonia Beautiful, Inc., the City of Gastonia, its agents and employees from any and all claims I do or may have as a result of being involved in this cleanup.

Name (print)	Signature	Date	Parent/Guardian Signature if under the age of 18