



QCP FOOTSTEPS FOR PROGRESS WAIVER FORM

WAIVER FORM

I, the undersigned in consideration of being permitted to participate in

Queens Centers for Progress
Footsteps for Progress Walk
on April 25, 2015

Waive and release any and all claims and hold QCP harmless against demands which I or my heirs, personal representatives or assigned may have against Queens Centers for Progress regarding my participation in the walk. In the event of any and all injuries or illnesses sustained by me or any aggravation of any illness or injury while participating in the walk I hold QCP harmless. I hereby give my consent for Queens Centers for Progress to use my photograph and likeness to be used in its publications, on its website, Facebook page and in releases to the press following the event.

Participant's Signature Date

Parent/Guardian Signature (if under 18) Date

Please Print:

Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

Telephone: _____

E-mail Address: _____

Mail , Email or Fax Waiver forms to: Queens Centers for Progress
Footsteps for Progress Annual Walk
81-15 164th Street
Jamaica, NY 11432
Fax: 718-380-0483
wwphaff@queenscp.org