

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 16, 2016

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.

	Participa	ınt's Sigr	nature	Date	
Parent/	'Guardia	n Signatu	ire (if ur	nder 18)	Date
Please Print	:				
Name:					
Address:					
City:		_State:	Zip	Code	
Telephone: _					
E-mail Addr	ess:				

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