

# Lemonade Day!

## WABASH VALLEY

### Mentor Information - For email and notification tracking purposes only

Parent/Mentor Information

First Name																				Last Name																		
Email																																						
Zip																				Phone																		<input type="checkbox"/> I DO NOT wish to receive emails for Lemonade Day

### Participant Information - Please fill in all information for each participant you register

Child 1

First Name																				Last Name																		
Gender	<input type="checkbox"/> M	<input type="checkbox"/> F	Grade	<input type="checkbox"/> Pre-K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	<input type="checkbox"/> 6th	<input type="checkbox"/> 7th	<input type="checkbox"/> 8th	<input type="checkbox"/> High School	Ethnicity	<input type="checkbox"/> African American	<input type="checkbox"/> Asian	<input type="checkbox"/> Other	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Alaska Native																		

### Participant Information - Please fill in all information for each participant you register

Child 2

First Name																				Last Name																		
Gender	<input type="checkbox"/> M	<input type="checkbox"/> F	Grade	<input type="checkbox"/> Pre-K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	<input type="checkbox"/> 6th	<input type="checkbox"/> 7th	<input type="checkbox"/> 8th	<input type="checkbox"/> High School	Ethnicity	<input type="checkbox"/> African American	<input type="checkbox"/> Asian	<input type="checkbox"/> Other	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Alaska Native																		

### Participant Information - Please fill in all information for each participant you register

Child 3

First Name																				Last Name																		
Gender	<input type="checkbox"/> M	<input type="checkbox"/> F	Grade	<input type="checkbox"/> Pre-K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	<input type="checkbox"/> 6th	<input type="checkbox"/> 7th	<input type="checkbox"/> 8th	<input type="checkbox"/> High School	Ethnicity	<input type="checkbox"/> African American	<input type="checkbox"/> Asian	<input type="checkbox"/> Other	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Alaska Native																		

**CONSENT**  
 As the parent or guardian of the child/ren named above, I consent to my child/ren's participation in Lemonade Day. I understand that Lemonade Day is a family event, and I agree that I (or another responsible adult whom I approve) will assist and supervise my child/ren. I understand that the organizers of Lemonade Day are not and will not be responsible for supervising my child/ren. I also understand that certain municipalities may have certain health and safety requirements so that my child/ren can participate in Lemonade Day. I agree to comply with and ensure that my child/ren comply with these requirements. (Go to LemonadeDay.org and check your city's website for some of the local requirements.) I also understand that certain municipalities must be provided the name of the person who will supervise my child/ren and the exact location of my child/ren's lemonade stand ahead of time, and I agree to comply with these requirements.

**RELEASE AND INDEMNITY**  
 I hereby release, discharge, and covenant not to sue P4L d/b/a Lemonade Day, the organizers of Lemonade Day, and their directors, officers, employees, agents, volunteers, representatives, owners, members, affiliates, successors, assigns and anyone associated with P4L or Lemonade Day (collectively, "Released Parties"), from all liability to me, my child/ren, my and my child/ren's personal representatives, assigns, heirs and next of kin, for any and all claims, demands, actions, complaints, suits, losses or damages on account of any injury to me or my child/ren or in connection with my child/ren's participation in Lemonade Day, including, but not limited to, personal injuries or property damage, caused or alleged to be caused, in whole or in part, by the negligence of the Released Parties or otherwise.

If, despite this release, I, my child/ren, or my or my child/ren's personal representatives, assigns, heirs or next of kin, make a claim against any of the Released Parties named above, I agree to indemnify, defend and hold harmless the Released Parties from any litigation expenses, attorney fees, loss, liability, damage, or cost incurred, due to a claim made against any of the Released Parties, even if such injury is caused by the negligence of the Released Parties.

Furthermore, I agree to release, indemnify, defend and hold harmless the Released Parties from and against any and all claims, demands, actions, complaints, suits, losses, damages or other forms of liability that any of them may sustain (a) arising out of my or my child/ren's failure to comply with applicable laws; and (b) arising out of any damage or injury cause by me or my child/ren in connection with my child/ren's participation in Lemonade Day.

I HAVE READ THIS PARENTAL CONSENT, UNDERSTAND THAT BY AGREEING, I GIVE UP SUBSTANTIAL RIGHTS THAT I AND/OR MY CHILD/REN WOULD OTHERWISE HAVE TO RECOVER DAMAGES FOR LOSSES OCCASIONED BY THE RELEASED PARTIES' FAULT, AND SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT. I ALSO CONFIRM THAT I AM THE PARENT OR LEGAL GUARDIAN OF THE CHILD/REN NAMED ABOVE.

**PHOTOGRAPHY DISCLAIMER**  
 I hereby grant P4L d/b/a Lemonade Day, permission to make still photographs, video recordings and audio and other recordings of me and/or my child/ren and/or using my name and/or my child/ren's name and/or my likeness and/or my child/ren's likeness and/or to use of verbal quotes from me and/or my child/ren (the "Authorized Materials") and to reproduce and distribute the Authorized Materials in or across any media. I also give Lemonade Day permission to use the completed Authorized Materials, and to use my or my child/ren's name and likeness, for Lemonade Day promotional and commercial purposes without any compensation or remuneration to me and/or my child/ren; in like and related regard, Lemonade Day will not charge or assess me or my child/ren any fees or service charges for my or my child/ren's voluntary participation in any audiovisual product production. I authorize Lemonade Day to use, edit, copy, publish, or exhibit any Authorized Materials for any lawful purpose anywhere in the world. I waive the right to review any materials produced by Lemonade Day, including those which use my or my child/ren's name and likeness and/or are Authorized Materials. Further, I relinquish and grant to Lemonade Day all rights, title and interest in and to the Authorized Materials that I and/or my child/ren may have, including, but not limited to, completed still photographs, video tapes or audio recordings, negatives, prints, reproductions and copies of the masters, negatives, recordings, duplicates, prints and verbal quotes for print, and I will not object to or take any adverse action whatsoever against Lemonade Day for use, reproduction or the like of any such Authorized Materials.

Adult's Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Date