

Pittsburgh Irish Festival Volunteer Release and Waiver of Liability

Contact Information

Name:				Age:
Address:				
City:			State:	Zip:
Phone:	E-mail:			
Emergency contact:		Pho	one:	
Relationship to volunteer:				
Waiver I do hereby represent that	t:			
1. I am 18 years of age or 2. I recognize and apprece Festival / Irish Partnership, Inc. eve 3. I am submitting this release. I hold harmless and ag officers, directors, staff, and voluninjury, personal injury or property Pittsburgh Irish Festival / 5. I acknowledge that I have agree to be legally bound by it.	iate any dangers and nts. ease and waiver of lial ree to indemnify the Paters from all claims, ling damage which may dirish Partnership, Inc.	cility declaration voluittsburgh Irish Festive ability, and damage occur from any caus event in which I part	untarily and val, Irish Pars I may sustee before, duticipate as a	of my own free will tnership, Inc., its ain from any bodily tring or after any volunteer.
Signature				
Print Name				
Date				
Signature of Parent or Le	gal Guardian (if volunt	eer is under age 18)):	
Parent or guardian Signat	ture		Date	
Print name of parent or gu	uardian			