WAIVER, RELEASE OF LIABILITY, AND ASSUMPTION OF RISK

COMP ("Confe	UTER TRAINING INSTITU erence"), which is scheduled	, voluntarily agree to this Val's Name)'s participation in the TE OF CHICAGO'S ("CTIC") TECHMEN CONFERED to occur on June 17, 2017, from _10_ am to _2 process, licensees, successors, representatives, and/or assigns	NCE m. "CTIC"
	ter Training Institute.	, , , , , , , , , , , , , , , , , , , ,	
In cons	ideration for the opportunity	For my child to participate in the Conference, I agree to	the
		ility, and Assumption of Risk:	
		for organizing my child's transportation to and from the	
		engage in all CTIC-sponsored activities at the Conference	
3)	child – may be broadcast or	edia collected from the Conference – including those involutional published in all media forms. I consent to the use of all n	nedia
		C collects at the Conference, and I release CTIC from all	
		ne use of this media. I also waive all rights to all photos a	
		the Conference. I furthermore waive any rights of compe	ensation
45	based on any use of such me		
4)	Conference. These risks inc	ertain risks and dangers association with my child participate, but are not limited to: falls which can result in injury	y; injury due
		ne part of CTIC; and/or injury of any kind due to a child' y of these above mentioned risks may result in injury. I w	
		r the risks that may result from my child's participation a	
		me the risk involved with him/her participating in the Co	
5)		any and all liability arising out of my child's participation	
σ,		CTIC from all claims that may arise involving my child	
		the negligent acts or omissions of CTIC to the fullest ext	
		ment shall be binding upon my successors, representativ	
6)		Conference, my child will be instructed regarding their b	behavioral
		C from all injuries which may result from my child's fai	
7)		rence is fromam topm and agree that	t CTIC is in
,,		njuries, damages, or other occurrences that may happen	
I give f	ull permission for CTIC to a	minister first aid, and in case of serious illness or injury,	to call for
		child and to transport the child to a medical facility. I ha	
		Waiver, Release of Liability, and Assumption of Risk	
		, and release CTIC from all potential claims that may	
	_	aference. I further agree to waive all potential claims	
		ticipation in the Conference.	B
0110.	arising out or my time s pu	····	
Parent of	or Guardian's printed name		
Parent of	or Guardian's signature		
Date			