Philippine American Youth Organization San Diego

Spreading Filipino Culture in San Diego since 2002.



Signature of Legal Guardian

Chairperson: Alfred Barrion Vice Chairperson: Alex Arroyo Director of Finance: Kenneth Manlapaz Director of Service: Mia Mae Dacasin Director of Spirit: Karessa Manlapaz Director of Public Relations: Nicole Delacruz Advisor: Rey Idos

WARNING, WAIVER, AND RELEASE OF LIABILITY

DATE OF EVENT: November 22, 2017		
I,, understand the of California, Irvine will require participating in off cal	nat participation in the <u>PAYO's College Tour</u> mpus events.	to the University
I hereby waive, release and discharge any and all claim which may have, or which hereafter accrue to me, aga Organization (PAYO) as a result of my participation board, officers, and volunteers, and any public agen connected in any way with my participation in the even of the event which may cause personal injury; knowing and to release and to hold harmless all of the persons of me (or my heirs or assigns) for damages. It is further to of risk is to be binding on my heirs and assigns. It is paragraph be interpreted to impose on each party response.	inst Eastlake High School and the Philippine in the event. This release is intended to discusse from and against any and all liability nt. I further understand that accidents and injuring the risks, nevertheless, I hereby agree to as or agencies mentioned above who might othe understood and agreed that this waiver, releases the intention of the parties hereto that the parties	American Youth charge PAYO, its arising out of or tries can arise out ssume those risks rwise be liable to e and assumption
Further, I understand that photographs and videos taltherefore, PAYO reserves the right to all photos and videos containing myself, PAYO has the right to twill be available online. Any and only inappropriate particles Chairperson, Alfred Barrion, via email at chairperson immediately. Any other reason for the removal of a payor. For any questions, concerns, or requests, pleathairperson@payosd.org.	deos taken. By signing below, I agree that for hat photograph. All photographs and videos to hotographs and videos must be reported to I @payosd.org. The photograph or video will whotograph(s) or video(s) will be reviewed an	any photographs aken at the event PAYO or PAYO's then be removed and determined by
I acknowledge that I have been fully informed of the rihave read and fully understand the above Warning, W reasons for my being requested to sign this Release have	aiver, and Release of Liability. I further ackr	owledge that the
I am signing this Release on my own free will and I ha	ve not been influenced or coerced by any repr	resentative.
Must sign in blue or black ink		
Printed Name or Participant	Date of Birth (MM/DD/YY)	
Signature of Participant	Date	
Printed Name of Legal Guardian	Phone Number	

Date