

See A New Sun Foundation Inc.



Second Annual Walk for Suicide Prevention

Waiver and Release of Liability

I understand that I am voluntarily participating in the See A New Sun Foundation Walk at my own risk and my own request. I hereby waive all claims against the See A New Sun Foundation, sponsors, or any event personnel, paid or volunteer, for any injury that I might suffer in this event. I also grant full permission for the free use of my name, picture and voice in any broadcast, telecast, print account or any account in any medium used in connection with this event or future events of the See A New Sun Foundation.

X _____ Date _____

Participant Signature-Parent or Guardian if under 18