



Volunteer Liability Release

Volunteer Name:	
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By signing, I hereby expressly acknowledge that biking, like many sports such as swimming, golf, soccer, and gymnastics involves movement and physical activity, and that injury or mishap are possibilities in spite of all reasonable safeguards and precautions taken. Further, I hereby expressly acknowledge that photographs and/or videos of me may be taken by parties outside the control of iCan Shine in connection with participating in this program. I acknowledge that iCan Shine has limited or no control over such activities of third parties and has no control over any editing and/or use of such photos and/or video footage. I accept such risks as reasonable and proper, and agree to hold harmless the officers, principals, staff and volunteers of the Autism society of Southeastern Wisconsin and the Down Syndrome Association of Wisconsin, iCan Shine, Inc., and Rainbow Trainers, Inc. should injury or mishap occur in this regard.

I give permission to be photographed and/or videotaped in print or electronic media by iCan Shine or third parties acting on behalf of iCan Shine. I acknowledge and agree that photographs and videos may be edited and used in whole or in part as desired for the purpose, which may be produced, duplicated, distributed and used for informational, promotional or other public purposes. I understand that photographs and video are not my property and there will be no compensation to me.

Volunteer Signature (typed signature is acceptable):	
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Submission Instructions:

Please return the completed Volunteer Registration Form, including above Liability release via email or mail. Send to:

email: heather@assew.org

Mail: Autism Society SE WI; attention Heather 3720 N. 124th Street, Suite O, Wauwatosa, WI 53222.