

**ACKNOWLEDGEMENT OF RISK AND ASSUMPTION OF
PERSONAL RESPONSIBILITY
RELEASE STATEMENT**

Inside Out

I understand that participation in an Inside Out program will involve risk. I also understand that, although Inside Out has taken precautions to provide a safe environment, have proper equipment and qualified staff, it is impossible to guarantee absolute safety. I have freely chosen to participate and I hereby assume the risks associated with Inside Out's program.

I agree to follow the instructions and directions given to me by Inside Out staff members. I understand, too, that I have a responsibility for my own safe participation in this program, and I assume this responsibility.

Participant
signature _____ Date _____

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Printed name _____

PARENT(S) / GUARDIAN(S)

I (we) understand the content of the Inside Out program and consent to the participation of the above named participant. Except in instances of gross neglect, I (we) release the institution known as Inside Out, Inc., and all associated staff and employees, from any liability which may arise out of, or in connection with, my (our) son/daughter/ward's participation in an Inside Out program. I (we) grant Inside Out Inc. permission to use photographs and/or video that include the above named participant for advertising or on the Inside Out web site.

Parent(s) or guardian(s) signature

_____ Date _____

_____ Date _____

Inside Out  PO Box 1200 – Flat Rock, NC 28731 – (828)697-5295