

**LIABILITY RELEASE AND  
AUTHORIZATION RE: MEDICAL  
INFORMATION AND PUBLICITY**

The undersigned have requested that the Together Forever: A Skyler Sanders Family Foundation, Inc., (hereinafter referred to as “Together Forever”) of Missouri, allow them to participate in \_\_\_\_\_

\_\_\_\_\_.

Participants, and the parents or legal guardians of the Participants and any minor Participants, are signing this Liability Release and Authorization Re: Medical Information and Publicity (“Release and Authorization”) to bind themselves, their minor children, their heirs, successors, assigns, and estates to the conditions described herein.

**Liability Release**

Participants understand that involvement in the activity with Together Forever may entail risk of injury or harm to the Participants and agree that this risk is fully assumed by the Participants. In addition, and in consideration of Together Forever participating in the activity the Participants hereby release and agree to hold Together Forever harmless for, from and against any and all liability, damages and claims (“Claims”) of any kind known and unknown, which may be connected with, result from, or arise out of the consideration, preparation, fulfillment or participation with Together Forever. This includes, but is not limited to, Claims involving economic loss, illness or medical condition, accidental injury or death.

### Publicity Authorization

Participants understand and agree that their participation with Together Forever may result in publicity, whether or not Together Forever actively takes steps to publicize the activity. However, to the extent Together Forever has control over the matter, Participant's parents or guardians are asked to choose between the following two alternatives. [Note: By signing this Release and Authorization, all other Participants (or their parents/guardians if under the age of 18) agree to be bound by the "publicity option" chosen by Participant's parents or legal guardians.]

OPTION 1 [*Publicity O.K.*]: Participants authorize Together Forever to publicize the activity and to use Participants' names, likenesses and other information about Participants and the activity (including Participant's medical condition), whether embodied in photographs, videotapes, recordings or any other format (collectively, "Information"), for purposes of promotion, publication, commercial advertising, or any other purpose whatsoever, now or at any time in the future. Participants understand and agree that Together Forever may use any such Information: (1) in all manner and media whatsoever, whether now known or hereafter invented, including electronic and print media and the Internet; (2) with or without Participants' names; (3) without the payment of royalties or other compensation to anyone; and (4) without the need to notify them or to seek further approval before doing so.

*Initials of Participants' parents/  
guardians if authorizing publicity:*

\_\_\_\_\_

OPTION 2 [*Prefer no publicity*]: Participants request that information about their involvement in the activity not be actively publicized by Together Forever to the electronic or print news media, posted on the Internet, or used in Together Forever "collateral" such as newsletters, brochures,

annual reports, etc. However, each Participant understands and agrees: (1) that information regarding the activity and Participants will necessarily be discussed with and disclosed to those involved in the activity process; (2) that Together Forever may publicly describe and promote the activity generally, without specifically identifying Participants; and (3) that even if Together Forever does not actively publicize the activity, the general public and media may obtain information concerning Participants' involvement in the activity from other sources.

*Initials of Participants' parents/guardians  
if prefer activity not be actively publicized:*

\_\_\_\_\_

By my signature below, and in consideration of Together Forever allowing me to participate in activities with said organization, I/We hereby release Together Forever, its agents, officers, directors, contractors, servants, employees, members and affiliates (hereinafter referred to as the "TF Team") and their successors, heirs, assigns, representatives from any and all claims, losses, liabilities, damages and cause of action whatsoever, including those arising from the acts or omissions of the TF Team and otherwise, in connection with the preparation, execution and fulfillment of the activity, on behalf of ourselves, the above named Participants, and all other Participants listed above. The scope of this Release shall include, without limitation, damages, liabilities, losses or injuries arising in connection with the transportation, food, lodging, medical concerns, entertainment, photographs, and physical injury of any kind.

I/We further agree to hold harmless and to release the TF Team, their successors, heirs, assigns and representatives from any and all claims, losses, liabilities, damages, and cause of action of every kind, including those arising from the acts or omissions of the TF Team and otherwise, from any and all physical, or emotional injuries or damages which may happen to me/us, or damages to

or theft of our personal belongings, jewelry or other personal property which may occur during the activity.

Participants acknowledge reading and understanding this Release and Authorization. For the Participants and any minor Participants, the signature of their parent or guardian is on behalf of the parent/guardian and on behalf of the minor. Participants agree that this Release and Authorization fully and accurately expresses their understanding and has not been modified orally or in writing.

\_\_\_\_\_  
*Date*

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*Parent/Legal Guardian of Participant*

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*Date*

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*Parent/Legal Guardian of Participant*

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*Date*

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*Parent/Legal Guardian of Participant*