

# Get ready for your YouthSpark Camp

Please complete this form for each child participating

## Participation Agreement

Thank you for your interest in the Microsoft Store YouthSpark Camp (the "Camp"). The parent or legal guardian of every Camp Participant must complete, sign, and submit this Participation Agreement as a condition of enrollment and participation. If more than one child will attend the Camp, please complete a separate Participation Agreement for each Participant.

**IN ORDER TO PARTICIPATE, PARTICIPANT MUST BRING THIS COMPLETED AGREEMENT TO THE CAMP. EACH SECTION BELOW MUST BE INITIALED WHERE INDICATED, DATED, AND SIGNED.**

By signing and initialing each box below, I certify that I am the parent or legal guardian of the Participant, that I am over the age of eighteen, and the Participant has my permission to attend the YouthSpark Camp.

I understand that if Participant is attending the Camp as part of a group activity that I have arranged for them (e.g., Boy Scouts, Girl Scouts, 4-H, Participant will be under the care and control of an adult that I have personally approved as a representative (e.g., teacher, counselor, field trip chaperone) of such group activity (the "Authorized Adult") and Participant will be released to the care of such Authorized Adult at the conclusion of the Camp. Microsoft is not responsible for the conduct nor do we verify the qualifications of any Authorized Adult. \_\_\_\_\_ (Initial)

**I UNDERSTAND THAT UNLESS PARTICIPANT IS UNDER THE SUPERVISION OF AN AUTHORIZED ADULT, I MUST REMAIN PRESENT IN THE MICROSOFT STORE AT ALL TIMES WHILE PARTICIPANT IS ATTENDING THE CAMP.** \_\_\_\_\_ (Initial)

If I am not present while Participant is attending the Camp, for any reason, and Participant requires emergency medical care of any kind, I authorize Microsoft Corporation ("Microsoft") and/or the Authorized Adult to arrange for emergency medical care for Participant, if reasonably required, and I agree to be responsible for all related costs. I agree that I am responsible for any damage to Microsoft property caused by Participant. I understand that Microsoft reserves the right to remove a Participant from the Camp if it considers the Participant to be disruptive in any way. To the maximum extent permitted by applicable law, I release Microsoft, its subsidiaries and affiliates, and their respective officers, directors, employees, and agents, from all claims and losses, of any nature, arising out of or relating to, the Participant's attendance at the Camp. \_\_\_\_\_ (Initial)

I understand that Microsoft may take photos or video of the Camp to be used for promotional purposes. Accordingly, on my own behalf, and on that of Participant, I hereby assign, transfer, and irrevocably grant to Microsoft the right to photograph, videotape, and record Participant and use Participant's likeness and voice for marketing and promotional purposes, on a worldwide basis, in perpetuity, in any medium. I specifically release Microsoft and its agents from any and all claims, of any and every nature, based on any use or uses of the above. \_\_\_\_\_ (Initial)

### Parent or Guardian

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Name and relationship to participant

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Address

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Phone number

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Email address

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Signature of parent or legal guardian

Date

### Participant

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Name

Age

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Emergency contact

Relationship

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Emergency phone

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Allergies

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Medical conditions / special accommodations

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