

**Boston Progress Arts Collective
RELEASE OF LIABILITY**

Name: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Event/Activity: 2005 APIA Spoken Word & Poetry Summit (Boston, MA)

Date(s) of Event: August 18, 2005 - August 21, 2005

By signing this release:

- I confirm that all information above is factual.
- I accept responsibility for any dangers involved in activity/event stated above.
- I agree to release, hold harmless, and indemnify "Boston Progress Arts Collective," the co-sponsors, and volunteers associated with the APIA Spoken Word/Poetry Summit from all claims for injury or damage resulting from any cause, including negligence, which arises out of my participation in, or travel to and from all past and future APIA Spoken Word & Poetry Summit activities. This Release is also binding as to any other persons, including all family members, heirs and executors.
- If I am signing on behalf of a minor, I recognize that I may not release any claims the minor may have. However, I accept full responsibility for all medical expense incurred as a result of the minor's participation in, or travel to and from past and future APIA Spoken Word & Poetry Summit activities. I also agree to release, hold harmless and indemnify "Boston Progress Arts Collective," the co-sponsors, and volunteers from any claims brought by or on behalf of the minor.
- I am over 18 years of age or my legal guardian has also read and signed this Release below my signature.

Participant Signature Date

Parent/Legal Guardian Signature Date

Printed Parent/Legal Guardian Name Date