



GENERAL DELEGATION LIABILITY RELEASE FORM

This form must be signed by each delegate and their legal guardian (if under 18) before they are allowed to participate in any of Voices on the Border's delegations. Print, Sign and upload when sending in your delegation application to be considered for said delegation.

I, _____, (Full Legal Name), born on ___/___/_____ (Date of Birth) from _____, (Name of School or Organization) will be attending the _____ delegation in El Salvador held from ___/___/_____ through ___/___/_____, and hereby discharge, release, and waive any liability, cause of action, or claim against Voices on the Border while in El Salvador, its staff, agents, and others associated with the services provided during said delegation from any responsibility for providing medical care in case of injury or illness and against any claims of liability, loss of life, bodily harm, disappearance, theft, damage or cost which may arise out of traveling to, participating in, and/or returning from the said delegation, but excluding any liability for injury or damage caused solely by the willful or grossly negligent acts of said delegation, its staff, agents, and others associated with the services provided at said delegation. I understand that I am also to be held responsible for any willful or negligent damage deemed or admitted to be the result of my actions.

I acknowledge that I have read the above information, agreed to its terms, and have signed below indicating my discharge, release, and waiver Voices on the Border of any and all liability.

Note: All Delegate Liability Release Forms and the signatures attached to them will be kept on file for exactly one year following said delegation.

Delegate Name:

Legal Guardian (*for minors*):

Delegate Signature:

Guardian Signature (*for minors*):

Date of Signature:

Date of Signature:
