



ENOUGH

30 Hour Famine Waiver

The 30 Hour Famine event will take place at _____ on _____.

We understand that there are risks associated with participating in the World Vision 30 Hour Famine®. Participants will not eat solid foods for the duration of the Famine (with the optional exception of plain rice) and will only drink water and fruit juice.

No minor under the age of 13 may participate in the 30 Hour Famine. World Vision Canada (“WVC”) requires that minors between the ages of 13 and 18 who wish to participate in the 30 Hour Famine ask their parents/guardians for permission, and have their parents/guardians sign this consent and waiver agreement before enrolling in the program.

Persons who are pregnant, diabetic, recovering from surgery, or experiencing chronic illness or gastro-intestinal disease should not do the 30 Hour Famine®. Please consult your physician if you have any medical concerns or questions.

Those who cannot participate in the food fast due to medical or cultural reasons can pursue an alternate activity such as fasting from “(i.e. social media, video games, or desserts).”

The undersigned acknowledges and voluntarily assumes all risks associated in any way with participation in the 30 Hour Famine. The undersigned hereby waives for his/her self and/or the his/her participant child, their heirs, executors, administrators and assigns, any recourse he or she may have against World Vision Canada and its directors, officers, volunteers, organizers, employees, sponsors, successors, assigns and agents, (WVC personnel) and releases and discharges such persons from all claims, demands, damages, actions or causes of action whatsoever, and absolves such persons from all responsibility for any injuries that may arise in any way in connection with the 30 Hour Famine.

We further hereby undertake to hold and save harmless and agree to indemnify WVC and WVC personnel all of the aforesaid from and against any or all liability incurred by any or all of them arising as from, or in any way connected with, my, and/or my participant child’s participation in the 30 Hour Famine. We also agree to the potential recording and use of my and/or my participant child’s image and/or comments. World Vision Canada and its authorized partners and licensees may use, reproduce and communicate footage, recordings, images and/or comments of the Participant identified below acquired during the 30 Hour Famine, in whole or in part or in combination with or as a part of other matter.

By submitting this registration form, we acknowledge having read, understood, and agreed to the above waiver, release and indemnity. We warrant that the Participant is physically fit to participate in this event.

_____	_____	_____
Name of Participant	Signature	Date (mm/dd/yyyy)
_____	_____	_____
Name of Guardian (if under 19)	Signature	Date (mm/dd/yyyy)