

**CONSENT, WAIVER, RELEASE, HOLD HARMLESS
AND INDEMNIFICATION AGREEMENT FOR MINOR**

STATE OF MISSISSIPPI §

COUNTY OF GRENADA §

KNOW ALL MEN BY THESE PRESENTS:

I, the undersigned parent or legal guardian of _____, a minor child hereinafter referred to as Minor, for and in consideration of Minor being allowed to participate in the activities of FOLLOW YOUR HEART ARTS PROGRAM hereinafter FYH, including but not limited to the DELTA MUSIC INSTITUTE (DMI) and/ or GRAMMY MUSEUM MS (both in Cleveland MS) and / or ANY MS DELTA REGION MUSIC HERITAGE FIELD TRIP LOCATION occurring between JANUARY 1, 2021 and DECEMBER 31, 2021, do hereby release and discharge FYH and / or DMI, their representatives, agents, servants, volunteers, and employees from any and all damages on account of any injuries or illnesses sustained to or by Minor while engaged in such activity of FYH and / or DMI.

Additionally, I consent for Minor to engage in any other and further activities sponsored by FYH and / or DMI where ever they may occur whether related or not to the activity enumerated hereinabove.

This agreement shall constitute a bar to any recovery by the undersigned individually or brought for and on behalf of Minor, and said agreement may be urged and used by FYH and / or DMI as a bar to any recovery by the undersigned or by said Minor in any suit or claim instituted on account of any injury or illness sustained by Minor while engaged in activities of FYH and / or DMI.

HOLD HARMLESS AND INDEMNIFICATION

I, the undersigned, not only release and discharge FYH and / or DMI and / or GRAMMY MUSEUM MS, and /or OTHERS their representatives, agents, servants, volunteers, and employees from any and all liability from any and all claims or damages from any accident or illness sustained to or by Minor while engaged in the activities of FYH and / or DMI, but I do additionally agree to hold harmless and indemnify FYH and / or DMI, their representatives, agents, servants, volunteers, and employees against any loss, damages, or cost of whatsoever nature including expenditure of attorney’s fees which may be suffered as a result of any action, claim, or demand by Minor, by me, my heirs, successors, or assigns, or by any other person on his own behalf or for the benefit of Minor.

I also agree to reimburse FHY and / or DMI and/or GRAMMY MUSEUM MS, its representatives, agents, servants, volunteers, and employees for any and all expenses incurred from the return transportation of Minor for disciplinary reasons.

This Consent, Waiver, Release, Hold Harmless and Indemnification Agreement shall be binding upon my heirs, successors, and assigns and upon the heirs, successors, and assigns of Minor who was **born** on the _____ day of _____, _____.

EXECUTED this _____ day of _____, _____.

Signature (Parent or Guardian) _____

Print Name Signed _____

NOTARY

I acknowledge that this document has been executed by _____ on this _____ day of _____, _____ for the purposes presented therein.

Notary Public _____

Publicity: The opportunities afforded you by this program are dependent upon funding and good publicity. Participation requires you to authorize Follow Your Heart and sponsors of the program to (a.) record your likeness, playing, and voice on video, audio, photographic, digital, and electronic recordings; (b.) use your name in connection with these recordings; and (c.) use, reproduce, exhibit or distribute in any medium (e.g. print publications, videos, internet) these recording for any purpose Follow Your Heart deems appropriate, including promotional or advertising efforts. By signing, you release Follow Your Heart and those acting in its authority from liability for any violation of any personal or proprietary right you may have in connection with such use, and you agree that all such recordings, in whatever medium, shall remain the property of Follow Your Heart. **SIGNATURES REQUIRED:**

PARENT _____ **STUDENT** _____