

**HILTON HEAD PLANTATION FISHING CLUB (HHPFC)  
JUNIOR MEMBER LIABILITY WAIVER**

**JUNIOR MEMBER**

**NAME:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**PARENT OR GUARDIAN**

**NAME:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**JUNIOR PARTICIPANT WAIVER**

Participant and parent/guardian are aware and cognizant of the risks of physical injury associated with participation in this program and it is understood and agreed that any all activity, including the use of any provided equipment, notwithstanding any consultation or instruction, shall be at the participant's sole risk. The HHPFC shall not be liable for injury or damage to the participant's person or property arising out of or in connection with the participant's use of the services and facilities or the premises where the same are located, and the participant/parent/guardian hereby indemnifies and holds the HHPFC, its members and agents, harmless from all claims that may be brought against them by the participant or on the participant's behalf for any such injuries or claims aforesaid. Further, in the event of an injury, I do hereby give permission and consent to authorize such first aid and/or medical and/or hospital care as may be deemed appropriate, and any and all expenses incurred shall be borne and assumed by the participant, parents or guardian. I certify that I have no physical condition or disability that would make my participation in this program in any way dangerous to my health.

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**JUNIOR MEMBER SIGNATURE:**

**DATE:**

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**PARENT/GUARDIAN SIGNATURE:**

**DATE:**