

## **REGISTRANT RELEASE FORM**

I, the parent or legal guardian of the registrant, a minor, understand that the Norman Optimist Club does not supply insurance for the registrant. I recognize that in case of an injury, I am responsible for all medical care for the registrant. I hereby release, discharge and otherwise indemnify the Norman Optimist Club, its members, officers and directors against any claim by or on behalf of the registrant as a result of the registrant's participation in the program.

I have read each of the above statements and understand what this means. As a result, I do hereby authorize and give permission for the registrant to participate in the Norman optimist Club program.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_