

Kā Moku o Keawe Makahiki

RELEASE WAIVER/ FEE CALCULATION

Kā Moku o Keawe Makahiki is a cultural festival that includes activities and programs that expose its participants to risks of injury and property damage. In consideration of being able to participate in the programs and activities being offered by Pūko‘a Kani ‘Āina on January 19, 2019 the undersigned Participant and legal guardian/parent of Participant (if Participant is a minor) assume all responsibility for risk of injuries/damages that may be sustained by participating in Kā Moku o Keawe Makahiki. Legal Guardian/Parent for herself/himself and on behalf of Participant hereby agree to waive, release, indemnify and hold harmless Pūko‘a Kani ‘Āina and their respective agents, employees, directors, representatives, successors, assigns and heirs of any and all claims for injuries (including death) and damages arising out of Participant’s participation in the activities and programs of Pūko‘a Kani ‘Āina.

Participant and Legal Guardian/Parent on behalf of herself/himself and Participant hereby grant permission to Pūko‘a Kani ‘Āina to utilize the name, likeness, voice and words of the Participant in television, radio, film, newspapers, magazines, and in any other visual or written form of communication whatsoever for the purposes of a) communicating the programs and activities of the Kā Moku o Keawe Makahiki Cultural Festival to any members of the public and b) fundraising to support such activities.

Participant and Legal Guardian/Parent for herself/himself and Participant represent that Participant has no known physical or mental condition that would increase the likelihood of injury through participation in Kā Moku o Keawe Makahiki, and in case of emergency Pūko‘a Kani ‘Āina, its agents or employees are unable to contact the emergency contact below, hereby authorize the staff of Pūko‘a Kani ‘Āina to have Participant taken to and treated at the nearest available medical facility at Participant’s sole expense.

1 - Participant Name: _____

LAST NAME

FIRST (LEGAL)

Participant Signature

Age: _____ Hawaiian ancestry?

Legal Guardian/Parent (Print Name)

Legal Guardian/Parent Signature

Emergency Contact (Print Name)

Relationship / Contact Number

Additional spaces are provided on back of form for multiple family members along with the fee calculation and payment information.

2 - Participant Name: _____
LAST NAME *FIRST (LEGAL)*

_____ Age: _____ Hawaiian ancestry?
Participant Signature

3 - Participant Name: _____
LAST NAME *FIRST (LEGAL)*

_____ Age: _____ Hawaiian ancestry?
Participant Signature

4 - Participant Name: _____
LAST NAME *FIRST (LEGAL)*

_____ Age: _____ Hawaiian ancestry?
Participant Signature

5 - Participant Name: _____
LAST NAME *FIRST (LEGAL)*

_____ Age: _____ Hawaiian ancestry?
Participant Signature

FEE CALCULATION

DIVISION	HOW MANY	AMOUNT DUE
prek – grade 5 = \$3		
grade 6 – mākuā = \$5		
TOTAL		

Checks should be made payable to Pūko‘a Kani ‘Āina and can be turned in at the registration tent on the day of the event.