



AMARILLO ESCAPE AND MYSTERY MINOR RELEASE FORM

A parent or legal guardian must sign the following acknowledgement for all persons **under the age of eighteen (18).**

I, the undersigned, am the parent or legal guardian and I hereby execute the foregoing Release for and on behalf of the minor named herein and agree to bind myself, the minor, his/her executors, administrators, heirs, next of kin, successors, and assigns to the forms of the foregoing Release.

I hereby authorize any licensed physician, emergency medical technician, hospital or other medical or health care facility to treat the minor named herein for the purpose of attempting to treat or relieve such injuries. I consent to the administration of all medical care. By signing this agreement I agree I or the part of my responsible party lose my/ our right to sue anyone involved with Amarillo Escape and Mystery and/or MK Flood, LLC.

Emergency Contact Phone Number: _____

Parent/ Legal Guardian Name: _____

Parent/ Legal Guardian Signature: _____

Date: ___/___/___ Parent/ Legal Guardian/ Authorized Chaperone (***Please circle one***)

Minor #1 Name: _____ Age: _____

Minor #2 Name: _____ Age: _____

Minor #3 Name: _____ Age: _____

Minor #4 Name: _____ Age: _____

Minor #5 Name: _____ Age: _____

By signing this Release, you have agreed the above named minors are allowed to participate in an Amarillo Escape and Mystery event and have also confirmed that you have read and agreed to the terms and conditions on the Amarillo Escape and Mystery/ MK Flood, LLC "Participant Release and Waiver Agreement." MK Flood, LLC