



Non-Member Program Participant Waiver

I understand that I am participating in Y activities at my own risk and will not hold the Lakeland Hills YMCA liable and that the American Medical Association recommends that a person taking part in any strenuous physical activities consult their physician prior to participation.

I hereby assign and grant to the Lakeland Hills Family YMCA (and/or its clients) all rights of every kind and character whatsoever to copyright and/or use, reuse, publish photographs or the name and/or likeness of me in which I may be included, in whole or in part, of composite or reproduction thereof in color or otherwise, still or moving, without restriction as to changes or alterations, for any commercial print or advertising purpose whatsoever, with no time restriction.

Signature

Date

Print Name

Legal Guardian Signature (if under 18)

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