



Hội Đồng Trung Ương – Hướng Đạo Việt Nam  
International Youth Leaders Summit  
July 12<sup>th</sup> - July 16<sup>th</sup>, 2024 – Calgary, Canada  
Website: [www.hdtuhdvn.org](http://www.hdtuhdvn.org) - Email: [hdivn.summit@gmail.com](mailto:hdivn.summit@gmail.com)

## WAIVER STATEMENT AND CONSENT FOR USE OF PHOTOGRAPHS

### WAIVER STATEMENT

I, \_\_\_\_\_  
(Full name of Participant: First – Middle – Last)

*With the consent of my parent (if participant is under 18 years old)*

\_\_\_\_\_  
(Full name of Parent: First – Middle – Last)

hereby assume all risks and hazards of participation in HDTU-HDVN International Youth Leaders Summit.

I hereby do waive, release, absolve, and agree to indemnify and hold harmless Hoi Dong Trung – Huong Dao Viet Nam (HDTU-HDVN) and all employees, staffs, units, leaders, scouts, volunteers, other participants, related parties or other organizations associated with the activity from any and all claims or liability arising out of any injury to me and/or my son/daughter.

I hereby expressly authorize and request HDTU-HDVN organizing committee and staffs, his/her unit scout leaders to use their best judgment in any emergency or injury to me and/or my son/daughter requiring paraprofessional or professional medical attention or treatment. I agree to pay for all medical expenses for myself and/or my son/daughter.

### CONSENT FOR USE OF PHOTOGRAPHS

I hereby authorize and give full consent to Hoi Dong Trung – Huong Dao Viet Nam (HDTU-HDVN) to publish and copyright all photographs in which I and/or my son/daughter may appear at the International Youth Leaders Summit.

I further agree that HDTU-HDVN may transfer, use or cause to be used, these photographs in brochures, websites, social media, newsletters, advertisements, posters, displays, slide shows, videotapes, catalogs, CD-ROMs, and like publications, literature or materials without limitations or reservations.

I have read this release Waiver Statement and Consent for Use of Photographers agreement, understand it, and signed it voluntarily.

Signature: \_\_\_\_\_  
(Adult participant or parent/guardian)

Date: \_\_\_\_\_  
(mm / dd / yyyy)