

Edith Kanaka'ole Foundation

1500 Kalaniana'ole Street • Hilo, HI 96720 • Tel: (808) 961-5242 / Fax: (808) 961-4789

Acceptance of Conditions, Release of Indemnity Form

Name of Participant				
Organization				
Date(s)				
Is participant Native Hawaiian?	Yes	No		
We (I) the undersigned and responsibility for injury or other Properties under the Stewardsh minor(s) and authorized accomplarmless the Edith Kanaka'ole heirs, successors and assigns frout of the use of All Properties Foundation pursuant to Article by-laws by said minor(s) and authorized accomplant to Article	her liability hip of the l panying per Foundation om any clain s under the XII section	in connection in connection in connection in Edith Kanaka'c resons and agreems, its agents, and its agents, and its demands, or stewardship of the Edith I	n with the ole Foundate to indemred employed or other liased the Edith Kanaka'ole	e use of All ation by said nify and hold ees and their bility arising the Kanaka'ole e Foundation
Print or Type Participant's Name	Participant	t's Signature		Date
Print or Type Parent/Guardian's Name	Parent/Gi	ıardian's Signature		Date