

**Education Programs** Tele: 717-566-7100

## Participant Liability Release Form

Participant must complete this form in order to participate in the AACA Museum Model T Driving Program. Carefully read, complete and return this form with the Participant Driver's License Authorization Form, before your scheduled program month, via email: education@aacamuseum.org or mail: Education Department | AACA Museum, 161 Museum Drive, Hershey, PA 17033.

**AACA Museum Model T Driving Program** 

Program: AACA Museum Model T Driving Program					
Participant:	:				
Program M	Tonth Attending: (circle)	July	August	September	October
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participan Museum	g below, I assume any ri nt(s) due to my participat of all liability, costs and med program.	tion in the	program via	my actions. I re	lease the AACA
myself or	provide my consent for the minor if necessary. this emergency treatmen	I agree to		· ·	
Signature of Participant			Date		