

Appalachian Teen Challenge, Inc.  
Training Center

**Inquirer/Participant Liability Release**

I, \_\_\_\_\_, do hereby acknowledge that I am interested in utilizing or have been interested in utilizing the services of Appalachian Teen Challenge, Inc. (hereafter known as ATCI), or I am actively participating or have actively participated in an activity or program that is provided by ATCI.

I understand that the staff will refrain when possible from informing others of my interest and/or participation in an activity or program provided by ATCI; however, I release the staff and Board of Directors of ATCI from any and all liability and/or negligence or abuse liability claims in the event they either voluntarily or accidentally inform another person of my interest in or participation in an ATCI activity or program.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness' signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness' mailing address

\_\_\_\_\_  
Witness' phone number