

**RELEASE AND CONSENT FORM  
FOR MINORS TO VISIT THE  
MANHATTAN PROJECT  
NATIONAL HISTORICAL PARK AT HANFORD**

I, \_\_\_\_\_ (print name), give permission and consent for my minor age child/children to visit and tour the Manhattan Project National Historical Park facilities at the Hanford Site on \_\_\_\_\_ (date). I understand that the B Reactor National Historic Landmark is a radiologically controlled area with industrial hazards and other risks associated with it. I also understand that tours of the pre-war historic facilities are conducted indoor and in an outdoor environment in generally undeveloped areas, and that there are potential risks present there as well. I have therefore thoroughly discussed with my minor child/children the need to follow all instructions and directions of the tour staff.

I hereby knowingly and voluntarily release, hold harmless and forever discharge the U.S. Department of Energy, its Hanford Site contractors including, but not limited to, Central Plateau Cleanup Company and its subcontractors at the Site, their parent companies, successors and assigns, subsidiaries, employees and officers and directors from any and all claims, causes of action, losses, costs, and damages of any nature whatsoever I (or any other legal guardian) may have as a result of my minor child/children (named below) visiting the Hanford Site. This includes, but is not limited to, any claims under contract; tort; federal, state, or local laws; or claims growing out of any legal restriction on the right to permit or restrict visitors at facilities located at the Hanford Site.

I certify that I am either the parent or legal guardian of the minor covered by this Release and Consent and that I, or an individual authorized by me, will at all times during the Site tour be present with my child.

I have carefully read and fully understand all the provisions hereof. I acknowledge that there are no other agreements, written or oral, not expressed herein.

\_\_\_\_\_  
Name of Minor(s) (Please Print)

\_\_\_\_\_  
Date(s) of Birth

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date