

PHYSICAL OR DEVELOPMENTAL DISABILITIES (PLEASE DESCRIBE):

ANY OTHER INSTRUCTIONS OR PRECAUTIONS:

RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

For and in consideration of permitting my/our child to enroll in and participate in the HILLCREST PARK SEASONAL DAY CAMP recreational program sponsored by the CITY OF FULLERTON Parks & Recreation Department, I/we, the undersigned parent/guardian, hereby voluntarily release, discharge, waive and relinquish any and all actions or causes of action for personal injury, property damage or wrongful death occurring to the above stated participant arising as a result of participation in said recreational program or any activities incidental thereto wherever or however the same may occur and for whatever period said program may continue, and the undersigned parent/guardian does for him/herself, his/her heirs, executors, administrators and assigns hereby release, waive, discharge and relinquish any action or cause of action, which may hereafter arise for him/herself and for his/her estate, and agrees that under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute or present any claim for personal injury, property damage or wrongful death against the CITY OF FULLERTON and its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees for any of said causes of action, whether the same shall arise by the negligence of any of said persons, or otherwise.

IT IS THE INTENTION OF THE UNDERSIGNED _____ (parent/guardian initials) BY THIS INSTRUMENT, TO EXEMPT AND RELIEVE THE CITY OF FULLERTON AND THE RELATED PARTIES MENTIONED HEREIN, FROM ALL LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY THE NEGLIGENCE OF ANY PERSON OR ENTITY.

In addition, the undersigned parent/guardian has been notified that participants involved in City-sponsored recreation program are subject to being photographed or videotaped, and I/we hereby give permission for the CITY OF FULLERTON to use such photographs or videotapes to publicize and promote the City's recreation programs.

I/we, the undersigned parent/guardian hereby expressly acknowledge and agree that:

1. There is a risk of injury, including serious and permanent injury or death, from my/our child's participation in the activities involved in this program or event.
2. I/we knowingly and freely assume all risks of my/our child's participation in this program or event, and assume full responsibility for his/her participation
3. The undersigned parent/guardian, on behalf of said participant and for him/herself, his/her heirs, executors, administrators or assigns agrees that in the event any claim for personal injuries, property damage or wrongful death shall be prosecuted against the CITY OF FULLERTON and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, he/she shall defend, indemnify and save harmless the same CITY OF FULLERTON and the aforementioned related parties from any claim, cause of action, loss, liability, damage, lawsuit, cost or expense (including reasonable attorney's fees) by whomever or wherever made or presented for said personal injuries, property damage or wrongful death.

The Undersigned acknowledges that I/we had personally read, understand, and voluntarily sign this release and waiver of all liability and indemnity agreement, am/are fully aware of the potential risk and hazards which are inherent to engaging in the specified recreational program or any activities incidental thereto, including but not limited to, any negligent acts performed by the CITY OF FULLERTON and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, negligently created or maintained dangerous conditions of public property, weather conditions, equipment, machinery, playing conditions, other participants, on-site physical premises, structures or substantial works of improvement. The Undersigned voluntarily assumes all risks of loss, damage, or injury associated with participant's participation in the specified recreational program or any activity incidental thereto. Further, the Undersigned hereby agrees to inform the CITY OF FULLERTON Community Services Department of any changes to the information contained within this Authorization as soon as such new information is available.

SIGNATURE OF PARENTS/LEGAL GUARDIANS:

DATE: _____

DATE: _____

Fullerton Parks & Recreation

Camp Hillcrest - Seasonal Day Camp

AUTHORIZATION TO RELEASE UPON DISMISSAL & ACKNOWLEDGEMENT OF REVIEW
PLEASE PRINT. APPLICATION MUST BE COMPLETED IN FULL. ONE APPLICATION PER PARTICIPANT.

NAME OF PARTICIPANT: _____

NAME OF PARENT(S) OR LEGAL GUARDIAN(S): _____

AUTHORIZATION TO RELEASE UPON DISMISSAL

Please check one: My / Our child may walk home at the end of scheduled Camp activities.

I / We will have an adult pick up my / our child from the location.

Name of adults (18+ years of age) authorized to pick up my / our child from the site:

1) Name: _____ Phone: _____

Relationship: _____

2) Name: _____ Phone: _____

Relationship: _____

3) Name: _____ Phone: _____

Relationship: _____

4) Name: _____ Phone: _____

Relationship: _____

PROGRAM GUIDELINES ACKNOWLEDGEMENT

The Undersigned acknowledges that I/we had personally read, understand, and voluntarily sign this authorization to release, and am/are fully understanding of the program guidelines, policies and procedures listed in the Parent Handbook. Further, the Undersigned hereby agrees to inform the CITY OF FULLERTON Parks & Recreation Department in writing of any changes to the information contained within this Agreement as soon as such new information is available.

SIGNATURE OF PARENT(S)/LEGAL GUARDIAN(S):

Signature

Date

Signature

Date

PARENT OR LEGAL GUARDIAN'S RELEASE FOR THE ADMINISTRATION OF MEDICINE

The Fullerton Parks & Recreation Department recognizes the desirability of following a physician's recommendations as closely as possible during Program hours, just as does a parent or legal guardian at home or any other person (not necessarily a nurse), if the physician requests his/her assistance. The fact that this is not a service of accommodation which the Fullerton Parks & Recreation Department is legally required to perform is recognized by all parties signing this form and, in so signing, they agree to hold the City of Fullerton, its officials, boards, employees and volunteers free from any and all claims or legal action which might arise out of these arrangements.

I/We understand that the Fullerton Parks & Recreation Department is not legally obligated to administer medication to my child and, therefore, I/We agree to hold the City of Fullerton, its officials, boards, employees and volunteers free from any and all responsibility for the effects of administering such medication and the manner in which it is administered and to indemnify, and defend each of them against loss by reason of any civil action or judgment arising out of the administration of medication by Fullerton Parks & Recreation staff.

I/We, the undersigned, the parents or legal guardians of _____ **(Participants Name)**, request that the medicine described on reverse page, be administered to the participant, by a member of the Fullerton Parks & Recreation staff, in accordance with our physician's _____ **(Physician's Name)**, instructions on the reverse side of this form.

I/We will notify the Fullerton Parks & Recreation Department immediately if I/We change physicians or if the medication or dosage is changed.

I/We hereby acknowledge that the Fullerton Parks & Recreation Department staff administering this medication may not have formal medical training or be licensed, and I/We also acknowledge that medication will only be administered if it is received in a **properly labeled pharmacy bottle**. I/We further acknowledge that the Fullerton Parks & Recreation Department Staff has the right to refuse to allow a participant to attend the above stated program if said policy is not adhered to.

NOTE TO PARENTS: BOTH PARENTS MUST SIGN IF THEY ARE LIVING WITH, OR HAVE CUSTODY OF THE PARTICIPANT. SIGNATURE OF PARENTS/LEGAL GUARDIANS:

(PRINTED NAME)

(SIGNATURE)

(DATE)

(PRINTED NAME)

(SIGNATURE)

(DATE)