

Camp Bailey

2017 Summer Camp Activities Release

By signing this activities release of liability, I, _____, parent/legal guardian ("Parent") give permission for _____, my child ("Child"), to participate in any and all 2017 Camp Bailey Summer Camp activities including but not limited to transportation during any and all field trips. As Parent, I hereby affirm that I am the Parent with primary custody of the above reference Child and have full authority to execute this waiver on Child's behalf.

In consideration for Camp Bailey and/or Learning Ladder Preschool Academy ("CB/LLPA") accepting my child into Camp Bailey, I waive any and all claims for damages of any kind against CB/LLPA and further agree to indemnify and hold CB/LLPA harmless from and against any loss, claim, damage or liabilities that may arise out of any Camp Bailey activities. I waive any and all liability from injuries, faults, and any other emergency situations that may arise during activities throughout my child's participation in Camp Bailey. By signing, I waive all rights, claims, and other legal actions whatsoever now or in the future.

Camper Name:

Signature of Parent or Legal Guardian

Printed name of Parent or Guardian

Date

EMERGENCY CONTACT INFORMATION

Parents/Guardians

Name(s)

Street Address

City

State Zip

Phone Numbers

Phone Type
(Cell, work, etc.)

<u>Phone Numbers</u>	<u>Phone Type</u> <u>(Cell, work, etc.)</u>

Parents/Guardians Names

Best email addresses to reach Parents/Guardians