

The Center

The Chicago Southwest Suburban Community

Parish and Community Center Foundation

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DAVID F. SANDERS, Executive Director

REV. CHRISTINE HOPKINS, Pastoral Director

Chicago Southwest Suburban Community Parish & Community Center Foundation, dba "The Center" CAMP PARTICIPANT WAIVER FORM

I expressly acknowledge that there are certain dangers, risks, illnesses ("illness" is defined on the Camp medical handout) and personal injuries inherent to participating in The Center's programs, events, classes and/or other activities, which may result from unavoidable accidents or injuries, athletic activities, sports programs/classes, horseback riding, farm animals, the use of any equipment, exercise, or other activities or from my or my minor child(ren)'s or ward(s) physical conditions. I understand that The Center and its employees, agents, counselors, teachers, trainers, representatives, successors and assigns assume no responsibility for loss, damage, illness or injury to person or property that I or my minor child(ren) or ward(s), if applicable, may sustain as a result of my or their physical condition or resulting from my or their participation in any activities, programs, events classes, the use or non-use of any equipment, exercise, horseback riding, farm animals, field trips, waterfront and pool activities, canoeing/boating, campfires, hiking, or any other activities, classes, events, or programs at and/or sponsored by The Center. I expressly acknowledge, on behalf of myself and my minor child(ren) and ward(s), heirs and executors, that I voluntarily assume the sole risk for any and all dangers, illnesses and personal injuries that may result from my or my minor child(ren) and word(s) participation in any events/activities/programs/classes while at The Center and/or sponsored by The Center.

I also acknowledge that The Center often uses photographs, videotapes, programs, motion pictures, tape recordings, or other similar media for promotional purposes. I hereby consent to the use of my and/or my minor child(ren)'s or ward(s), name(s) and/or likeness(es) in such materials to exhibited and used for advertising, trade purpose, solicitation of patronage, promotional purposes, or other similar purposes, or other similar purposes, even if my and/or my minor child(ren) or ward(s) and/or likeness(es) are an integral part of such photograph, videotape, television program, motion picture, tape recording, or other similar media.

RELEASE

In consideration of The Center allowing my and/or my minor child(ren) or ward(s) to attend and/or participate in any programs, events, classes, or other activities at The Center and/or sponsored by The Center, I hereby, for myself, my minor child(ren) or ward(s), heirs, and executors, waive, release and forever discharge The Center and its directors, employees, agents, counselors, teachers, trainers, representatives, successors and assigns, from and against any and all rights and claims for any loss, damage, illness or injuries to person or property sustained as a result of my attendance and/or participation in any such programs, events, classes, and other activities, whether or not such loss, damage or injury results from the negligence of The Center and its employees, agents, or representatives or from other cause.

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RELEASE (continued)

I further waive any and all rights to inspect or approve photograph, videotape program, motion picture, tape recording or other use of my and/or my minor child(ren)'s or ward(s) name(s) and/or likeness(es), including any written article, script, caption, or other writing that may accompany such use of my and/or my minor child(ren)'s or ward(s) and/or likeness(es). I hereby, for myself, my minor child(ren) or ward(s), heirs, and executors, waive, release and forever discharge the Center and its employees, agents, counselors, teachers, trainers, representatives, successors and assigns, from and against any and all liability, claims, losses, cost, expenses or damages for libel, slander, invasion of privacy, conversion, defamation, appropriation of likeness or any other claim based on the use of my and/or my minor child(ren)'s or ward(s) name(s) and/ or likeness(es) in any such materials.

INDEMNIFICATION

I hereby represent and warrant to The Center that I have the authority to execute this Camp Participant Waiver Form on behalf of myself and/or on behalf of my minor child(ren) or ward(s) as parent, guardian and/or next friend, if applicable. In the event of any misrepresentation or breach of the foregoing warranty by me, or in the event that I, my minor child(ren), or ward(s), or any other person nevertheless asserts any claim against The Center arising out of my or my minor child(ren)'s, or ward(s)' participation in any programs, event, class or other activity as set forth herein, I agree to indemnify, hold harmless and defend The Center from and against any and all liability, claim, losses, costs, expenses or damages resulting therefrom, including, but not limited to, claims of loss, damage, illness or injury to person or property whether or not such loss, damage, illness, or injury results from the negligence of The Center or from some other cause.

EMERGENCY MEDICAL AUTHORIZATION

I give The Center permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a Certified staff member of the Center. I also give permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I authorize the Center to obtain immediate medical care and give consent to the hospitalization and performance of necessary diagnostic test upon, the use of surgery on, and/or the administration of drugs to his/her child or ward if an emergency occurs when he/she cannot be located immediately. It is also understood that this agreement may only cover those situations which are true emergencies and only when he/she cannot be reached. I understand that the provider will take every effort to contact me and/or my designated emergency contacts.

I/we will be responsible for payment of medical expenses. Medical treatment cost are covered by:

Medical Insurance Provider: _____ Policy # _____

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PARENTAL AGREEMENTS

- 1) The Center agrees to notify the parent/guardian whenever the child becomes ill and the parent/guardian will arrange to have the child picked up as soon as possible if requested by The Center.
- 2) The parent/guardian agrees to inform The Center within 24 hours or the next business day after his/her child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life-threatening diseases which must be reported immediately.
- 3) My child has permission to be transported by vehicles owned or hired by The Center and to participate in all Center programs, activities and related field trips.
- 4) My child has permission to participate in The Center swimming activities.
- 5) The parent/guardian authorizes the application of sunscreen and/or insect repellent for his/her child by The Center staff.

ACCEPTANCE

I expressly acknowledge and agree to the terms and conditions set forth on this Camp Participant Waiver Form.

Signature of Participant or Parent/Guardian

Date

Of Participant under Age of 18

Name(s) and Age(s) of Participant(s) under the Age of 18, If Any