

City of San Luis Obispo Parks and Recreation Department
PROGRAM REGISTRATION FORM AND WAIVER

PLEASE PRINT AND FILL OUT COMPLETELY



Name of Participant (Minor): _____

Permission to Photo/Video and Use of Images

I understand that City of San Luis Obispo staff may on occasion visit Parks and Recreation sponsored activities to take pictures and/or video for use in a City publication, for educational purposes or for a City Council/Commission meeting. My initials below indicate approval for use of such photography/video in which I or my child may appear. I understand that I will not receive compensation for the use of the pictures/video.

INITIAL HERE >> _____

Assumption of Risk, Waiver and Release of Liability for Minor (please read before signing)

For the Parent/Guardian on behalf of the Minor and the Parent/Guardian: I, the undersigned, am the parent/guardian of the minor named above ("Minor"). I understand that above named program, sponsored by the City of San Luis Obispo, involves physical activity. I further understand that accidents can occur during this recreation program and that participants can occasionally suffer serious injury or death. I further understand that while City staff and/or volunteers may be trained in basic first aid and CPR, they are not medical professionals and are not trained to diagnose, monitor or treat chronic or acute medical conditions, whether preexisting or caused by participation in this recreation program.

Nevertheless, I, **ON BEHALF OF THE ABOVE-NAMED MINOR (HEREAFTER "MINOR") AND FOR MYSELF, HEREBY ASSUME ALL RISKS OF PARTICIPATING IN THE THIS RECREATION PROGRAM.**

In return for allowing Minor to participate in this recreation program, I, on behalf of Minor and for myself, hereby waive, release, and discharge the City of San Luis Obispo, its officers, employees, agents and volunteers, for any and all claims for damages for death, personal injury, disability or property of any kind which may accrue to Minor or myself as a result of his/her participation in this recreation program. This waiver and release is expressly intended to discharge in advance the City of San Luis Obispo and its officers, employees, agents, and volunteers from and against any and all liability arising out of or connected in any way with Minor's participation in this recreation program. **THIS WAIVER AND RELEASE WILL APPLY EVEN THOUGH LIABILITY MAY ARISE OUT OF ORDINARY NEGLIGENCE OR CARELESSNESS ON THE PART OF THOSE SO DISCHARGED.**

This Assumption of Risk, Waiver and Release of Liability shall apply to Minor and myself, as well as any of our heirs, executors, or administrators. By my signature below, I hereby certify that I am the parent or legal guardian of Minor and that I am acting in that capacity. Further, I acknowledge that I have read this document and understand its contents.

Medical Insurance and Treatment

I also acknowledge that the City of San Luis Obispo, acting through its Parks and Recreation Department, sponsors this recreation program and understand that **NO MEDICAL INSURANCE IS PROVIDED**. I nevertheless approve Minor's participation in the program. Further, I consent to emergency medical treatment for Minor should the need arise. I expect that the program supervisors will make an effort to contact me, time permitting, before any treatment other than minor first aid is administered.

Signature of Parent/Guardian

Parent/Guardian Name (Print)

Date