

Carver County Historical Society

Waiver of Liability

I, the undersigned, give permission for my child to attend History Camp at the Carver County Historical Society. I understand that participants in the Day Camp will be involved in various outdoor and indoor activities. I hereby release Carver County and the Carver County Historical Society, their officers, directors, agents and employees from any claims, demands, injuries, damages, actions or causes of action whatsoever arising out of or connected with my child's participation in the History Day Camp.

The undersigned acknowledges that he/she has read and understands the above waiver and release, has authority to sign the waiver on behalf of the child, and is signing this document voluntarily.

Camp Name \_\_\_\_\_

Camp Date \_\_\_\_\_ Camp Session: PM

Signature of Parent \_\_\_\_\_

Name of Child \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent's telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

Email (to receive photos from camp): \_\_\_\_\_

Please note any medical concerns or allergies \_\_\_\_\_

\_\_\_\_\_

I hereby grant the Carver County Historical Society permission to use mine and my child(ren)'s likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by the Carver County Historical Society, in perpetuity, and for other use by the Historical Society. I will make no monetary or other claim against the Carver County Historical Society for the use of the photograph(s)/video.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Relation to the minor \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_

