SEALINOL CENTROL	Resident Grades Completed					
□Padawans		Wookiees	□Jedis	□Teen eXtreme Grades 6 th -9 th		
Grades K-1st	Grades 2nd-3rd	Grades 3rd-4th	Grades 4th-5th	Grades 6 ^m -9 ^m		
CITY OF SEMINOLE HOLLAND G. MANGUM RECREATION COMPLEX CHILD'S IDENTIFICATION RECORD						
Pre-Camp Days: May 30 th & 31 st	()	Week 6: July	v 8 th – July 12 th	()		
Week 1: June 3 rd – June 7 th	()	() Week 7: July 15 th – July 19 th ()				
Week 2: June 10 th – June 14 th	() Week 8: July 22 rd – July 26 th ()					
Week 3: June 17 th – June 21 nd	() Week 9: July 29 th – August 2 rd ()					
Week 4: June 24 th – June 28 th	() Week 10: August 5 th – August 9 th ()					
Week 5: July 1 st – July 5 th (Closed July 4 th)	() Post-Camp Days: August 12 th &13 th ()					
Child's Full Legal Name			Nickname			
T-SHIRT SIZE YS	YM YL_	AS	AM AL_	AXL		
Parent(s) E- Mail						
Male Female Birth Date_	Age Grade (2018-19 School Year)					
Address			Primary Phone			
Mother's/Guardian's Name			Home Phone			
Address (If Different from Above)			Cell Phone			
Place of Employment	Work Phone					
Father's/Guardian's Name	Home Phone					
Address (If Different from Above)	Cell Phone					
Place of Employment	Work Phone					

PEOPLE PERMITTED TO PICK-UP CHILD FROM SITE (OTHER THAN PARENT)

Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone

LIST THOSE <u>NOT</u> PERMITTED TO PICK UP CHILD FROM SITE

CHILD'S MEDICAL RECORD

Allergies _

Medications _____

Any behavioral or emotional needs or physical limitations staff should be aware of?

FIELD TRIP CONSENT

I hereby grant permission for ______ part of the Seminole Recreation Center's Summer Camp Program. to participate in recreational activities and weekly field trips as

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

SIGN-IN/SIGN OUT PROCEDURES

I understand that I am required to sign in my child each day and <u>MUST SIGN THEM OUT WITH THE PROPER IDENTIFICATION</u> at camp each day and understand that this policy is strictly enforced. I understand and assume the inherent risks, hazards and dangers associated with allowing my child/children to walk or ride a bike, unescorted, to or from the Seminole Recreation Center and further, understand and acknowledge that the City of Seminole provides no supervision or assistance to my child in traveling to and from the Seminole Recreation Center. The undersigned, nevertheless, voluntarily elects to allow my child/children to walk or ride a bike to and from the Seminole Recreation Center and hereby releases, waives and indemnifies the City of Seminole as more fully described hereinafter.

LATE FEE POLICY

Parents will receive a verbal warning for the first late pick up of their child. If late pickups continue, parent will be charged \$1.00 for every minute the child is left at the Seminole Recreation Center after the pick-up time.

PHOTO CONSENT AND RELEASE

I hereby authorize the City of Seminole to take photographs of my child(ren) and use these images in the promotion and marketing of the City of Seminole Recreation Center's programs, which may include media coverage and/or viewing by the general public. By signing below, I give my legal authorization for the City of Seminole to use of photos and video of my child(ren).

PARENT/LEGAL GUARDIAN (Please Print)

PARENT/LEGAL GUARDIAN (Signature)

DATE

CODE OF CONDUCT

Our goal is to offer a safe and enriching experience for all camp participants. In order to do this, reasonable rules and regulations are essential to ensure the safety of each child so they may enjoy the experience of camp. Staff is instructed to take a strong stand against negative behavior of any camper in the program. Please remember that your child's negative behavior affects the positive experience of all campers. Disciplinary measures will be taken when necessary.

NOTICE TO PARTICIPANTS/PARENTS/GUARDIANS

I, the parent, personally and individually and as legal guardian on behalf of the minor child named on the Child ID Form, do hereby understand and assume all risks and hazards incidental to unsupervised travel to and from the Seminole Recreation Center and my child's participation in the activities, use of the equipment and facilities of the City of Seminole do hereby waive, release, discharge and covenant not to sue the City of Seminole, its employees, officers, agents, volunteers, and elected officials from any and all claims, damages, losses or injuries of any kind to the person, or property resulting in the death of the person or persons participating in the activities, arising directly or indirectly out of or in connection with any negligent act or omission of the minor, parent as legal guardian, and the parent, personally and individually, their personal representatives and assigns.

Parent, personally and individually, and as legal guardian of the minor do hereby understand and assume any and all risks and hazards incidental to participation in the activities, use of the equipment and facilities of the City of Seminole and do hereby agree to defend, hold harmless and indemnify the City of Seminole, its agents and employees from any and all liability, loss or damage, including, but not limited to bodily injury, illness, death or property damage which the City of Seminole, its agents and employees become legally obligated to pay including reasonable attorney's fees and costs, as a result of claims, demands, costs or judgments, against the City of Seminole, its agents and employees on account of injury to any person or property resulting in death of the person or persons while using the municipal facility for the purpose described herein.

NOTICE REQUIRED BY F.S. §744.301 TO THE MINOR'S NATURAL GUARDIAN (S). READ THIS AGREEMENT COMPLETETLY AND CAREFULLY. I AM AGREEING TO LET MY MINOR CHILD ENGAGE IN POTENTIALLY DANGEROUS ACTIVITY. I AM AGREEING THAT, EVEN IF RELEASES USE REASONABLE CARE IN PROVIDING THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS AGREEMENT I AM GIVING UP MY CHILD'S RIGHT AND MY RIGHT TO RECOVER FROM RELEASES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO MY CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. I HAVE THE RIGHT TO REFUSE TO SIGN THIS AGREEMENT, AND THE CITY HAS THE RIGHT TO REFUSE TO LET MY CHILD PARTICIPATE IF I DO NOT SIGN THIS AGREEMENT.

I have read and voluntarily sign this Agreement, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

I hereby agree that I am the natural guardian(s) or legal guardian(s) of the Minor and that I am fully competent and legally able to execute this Agreement on behalf of the Minor with the intent to bind both myself and the Minor by the terms hereof.

Should any paragraph or portion of any paragraph of this Agreement be rendered void, invalid or unenforceable by any court of law for any reason, such determination shall not render void, invalid or unenforceable any other paragraph or portion of this Agreement.

THIS RELEASE, WAIVER, HOLD HARMLESS AND INDEMNITY AGREEMENT MUST BE SIGNED BEFORE THE MINOR MAY ATTEND THE PROGRAM..

BY SIGNING THIS AGREEMENT YOU ARE WAIVING OR RELEASING VALUABLE LEGAL RIGHTS. YOU MUST READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT.

IN WITNESS WHEREOF, the undersigned has caused this Agreement to be executed this day of ______, 2019

BY: NATURAL GUARDIAN OR LEGAL GUARDIAN OF MINOR (with legal authority to execute this Agreement on behalf of the Minor if the participant is under 18.)

(Sign) (print) (Date) BY: PARENT, PERSONALLY AND INDIVIDUALLY (Sign)

(Print)_____(Date) _____