

Liability Waiver and Release

In consideration for being permitted to use Whitemarsh Township facilities and/or participate in Whitemarsh Township sponsored programs, I agree, for myself and/or for any minors in my care, to fully and completely release Whitemarsh Township its officials, employees, boards, departments, agents and affiliated entities from any and all claims, liabilities or actions for any personal injuries to me, personal injuries to minors in my care and/or any loss or damage to my personal property or the personal property of any such minors arising from our use of Whitemarsh Township-facilities or participation in Whitemarsh Township-sponsored activities and programs.

I understand that no health and/or accident insurance is provided by the Whitemarsh Township- I also understand and agree, for myself, and/or for any minors in my care, that I am solely responsible at any sole cost and expense for furnishing medical or other insurance to cover any expenses related to any such personal injuries or property damage.

I hereby give Whitemarsh Township- staff permission to secure emergency medical care for minors in my care who may suffer an injury or illness while in the temporary care of Whitemarsh Township representatives.

I agree, for myself and/or for any minors in my care, to comply with all Whitemarsh Township rules and regulations, including any rules and regulations governing any programs for which I, and/or any minors in my care, have registered, and understand and agree that noncompliance with any such rules and regulations by me, or any minors in my care, may result in termination of the privilege to use Whitemarsh Township-activities and/or participate in Whitemarsh Township sponsored activities and programs. In the event of such a termination for cause, I understand that I will not be entitled to be reimbursed for any registration fees.

I further agree, for myself and/or for any minors in my care, that I will furnish a certified birth certificate or proof of birth upon request by the Whitemarsh Township, as may be required for participation in Whitemarsh Township activities and programs.

I grant the right to use my/our name, image, photograph and video, including composite or modification, representations in publications, brochures, newsletters, reports, website and any other material relating to Whitemarsh Township parks and recreational programs, activities and facilities. I waive the right to inspect or approve versions of my/our image used for publication or the written copy that may be used in connection with the image.

Intending to be legally bound hereby, and with full authority, I acknowledge, agree to and accept the terms of this Liability Waiver and Release on behalf of myself and/or on behalf of any minors in my care.

Child's Name: _____ Age: _____

Parent /Legal Guardian Print Name: _____

Signed: _____ Date: _____