

**SUMMER CAMP at LA JOLLA HIGH SCHOOL
WAIVER AND RELEASE OF LIABILITY FORM**

In consideration of being allowed to participate in the summer camp at La Jolla High School, I acknowledge and agree that:

1. The Coggan Family Aquatic Complex does not maintain health insurance for injuries to the participant that may arise out of involvement in the class/activity.
2. By virtue of participation, participants risk bodily injury, but not limited to, paralysis, dismemberment, death, and other loss including damage to property.
3. I knowingly and freely assume all such risk for my child.
4. I release and hold harmless and promise not to sue the La Jolla Aquatic Complex Foundation dba, the Coggan Family Aquatic Complex, its officers, agents, or employees with respects to any and all such injury including but not limited to paralysis, dismemberment, death or loss except that injury or loss which results from gross negligence or willful or wanton misconduct of one of those individuals or organizations.
5. I agree to inform my child that he/she must follow all safety rules as well as any others given during camp.
6. I hereby authorize and give my consent for medical care to be given in an emergency situation to the below named child, while participating in the camp.
7. This agreement is binding on my heirs, personal representatives, next of kin, spouse, and assigns.
8. I hereby give permission for the below named child to be photographed, videotaped, or recorded for publicity purposes and that I waive all claims of compensation.
9. I certify to the best of my knowledge that my child's current physical condition is satisfactory for participation in the camp and that he/she is free of any health problems that would affect his/her ability to participate. Please note: individuals with health conditions such as, but not limited to chronic allergies (i.e. asthma), seizures, and epilepsy, may not participate until medical clearance has been submitted. In addition, the counselor must be notified of any health conditions prior to participation.

PARENT/GUARDIAN:

Please discuss the rules with your child. All campers are required to behave appropriately and responsibly. If children continue to disregard camp rules, parents will be notified to pick up their camper and no refunds will be granted.

Initials _____

CAMP RULES:

Respect other people and their property. Do not touch other people's belongings. No fighting. Be polite. No profanity. If you have a problem, tell a counselor or the camp director right away. Follow directions and join in the activities. Stay with your group. Never leave the designated area where staff can see you. Help clean up.

Initials _____

PARENT/GUARDIAN RULES:

Please bring campers to camp on time and always sign in and sign out. Please provide enough lunchtime food daily for your child. Closed toe shoes are required except during water play activities. Place an identifying label or mark on your child's possessions. Dress your camper appropriately for outdoor play. This includes sunscreen. Return all required forms ASAP. Get to know the Camp Director and Camp Staff. Please make all payments in full prior to your child's use of the camp services. Provide exact change or checks to the La Jolla High Summer Day Camp. NSF will be assessed a \$15 fee. Please call ahead for campers picked up after 6pm. Please direct your concerns to the Camp Director.

Initials _____

Child's Name _____ Date of Birth _____

I certify that as the parent/guardian of the participants listed, I consent to this waiver and release as set forth above. I realize that all participation in the program is voluntary.

Parent/Guardian (Print) _____ Relationship _____

Parent/Guardian (Signature) _____ Date _____

WHO IS AUTHORIZED TO PICK UP YOUR CHILD?

Name _____ Relationship _____

Telephone# _____

Name _____ Relationship _____

Telephone# _____