

Parent's Consent for Child to Participate at

Kashtan Summer Fun Group

As the parent/legally authorized representative of _____ (child's name),
I agree to the following:

- I will take the responsibility to see that my child is properly prepared for all activities including having an exam by a physician, the proper clothes, equipment, and being in good health.
- I consent to the taking and use photographs and digital or analog videos of my child now and in the future, whether that use be known to me or unknown, for the purpose of illustration or publication in any form. I waive any right to inspect or approve the photographs or electronic matter and waive any right to royalties or other compensation arising from or related to the use of this media.
- In the event of above child's sickness or accident I will not hold staff of Kashtan Summer Fun Group responsible and will release them from any form of liabilities.
- It is known that by me and my child's voluntary participation in camp activities, we are aware of and have acknowledged the existence of the risks and share in its assumption. Group activities with a known risk factor include all sports, hiking, adventure activities, camp craft activities, swimming, physically active games, archery, nature exploration. As a participant, or as a parent/guardian of the participant in this group, I recognize that there are certain risks of physical injury and I agree to assume the full risk of any injuries, damages, or loss resulting from participation in any and all activities connected with or associated with such programs.
- I agree to waive and relinquish all claims I may have as a result of my son/daughter's participation in the program, against Kashtan Summer Fun Group. I do hereby fully release and discharge Kashtan Summer Fun Group, employees and volunteers for any and all claims from injuries, damage or loss which I have or which may occur to me on account of my son/daughter's participation in the program. I further agree to protect, defend, and hold harmless Kashtan Summer Fun Group from any claims resulting or in any way associated with activities of the program. I have read and fully understand this consent release form.
- Kashtan Summer Fun Group is not responsible for lost, stolen, or damaged personal articles.
- As parent/legally authorized representative of the above-named child, I am by this document representing that I have the authority to consent to all medical/surgical care and treatment of my child. I hereby give my authorization and consent for staff members from Kashtan Fun Group to consent to the medical/surgical care and treatment of my child at my expense, including taking my child to an emergency room.
- **Kashtan Summer Fun Group does not provide refunds for no-shows or early checkouts.**
- **Damage reimbursement consent. I agree to reimburse Kashtan Summer Fun Group for any property damaged by my child. Minimum reimbursement amount is \$200.**
- My child has permission to take part in all camp activities, including swimming unless limited below. MY CHILD MAY PARTICIPATE IN ALL OF THE CAMP ACTIVITIES EXCEPT:

Print Name of Parent/Legally Authorize Representative: _____

Signature of Parent/Legally Authorized Representative: _____

Date: _____