



CITY OF BONNEY LAKE/SUMNER-BONNEY LAKE SCHOOL DISTRICT RECREATION DEPARTMENT

LIABILITY/RELEASE FORM

Child's Name \_\_\_\_\_ Parent/Guardian Name \_\_\_\_\_

Child's Name \_\_\_\_\_ Parent/Guardian Name \_\_\_\_\_

MEDICAL TREATMENT

I hereby give permission that my child may be given emergency treatment, to include First Aid and CPR by a qualified staff member. I also give permission for my child to be transported by ambulance, treated by aid car personnel and/or transported to an emergency center for treatment. In the event that I cannot be contacted, I further authorize and consent to the administration of any and all medical, dental, and surgical examinations or operations and treatment or all other related care, including the administration of drugs, tests, injuries anesthesia, and/or blood transfusions to the above named minor person that may be ordered by the physician and/or dentist in attendance at the medical center deemed necessary for emergency treatment. I hereby consent to the release of medical reports to any doctor or agency and consent to the admission of the above named minor person to the hospital.

I certify that I am the parent or legal guardian of the above mentioned child and that I have authority to authorize such treatment.

DISCRIMINATION STATEMENT

The City of Bonney Lake/Sumner-Bonney Lake School District Recreation Department is mandated to report all suspected and visual signs of child abuse or neglect to the Department of Social Health Services division of Child Protective Services.

INSURANCE

It is the responsibility of every individual, their parent or legal guardian to provide their own accidental and health coverage while participating in all City of Bonney Lake/Sumner-Bonney Lake School District Recreation Department programs and activities.

PARTICIPATION AUTHORIZATION

I give permission for my child to participate in activities, field trips, and to be transported as authorized by the City of Bonney Lake/Sumner-Bonney Lake School District Recreation Department.

SUNSCREEN POLICY

Our staff is not permitted to apply sunscreen to campers. Parents/guardians are responsible for applying sunscreen prior to the start of each camp day. It is also recommended that you provide your camper with his/her own bottle to apply during the day.

PAYMENT POLICY

Payments must be made by 12:00 PM on Monday, one week PRIOR to the week of enrollment. If a remaining balance is due on Tuesday, your spot will be forfeited to the next person on the waiting list. There is a \$25 late fee for any payments made after 12:00 PM on Monday, one week PRIOR to the week of enrollment. *All payments must be made at the Recreation Office unless payment is made over the phone.* Payments are accepted in the form of cash, check, or credit card (Master Card or Visa).

CREDIT/REFUND POLICY

Refund requests will only be accepted with a minimum two-week WRITTEN notice (less the \$50 deposit and a \$15 processing fee). There will **not** be a discount or a refund for days missed. Weekly deposits cannot be refunded, credited, or transferred to another week.

**ACTIVITY TRANSPORTATION PERMISSION - PARENTAL/GUARDIAN ASSUMPTION OF RISK, WAIVER AND RELEASE**

I (we) am/are the parent(s) or legal guardian of \_\_\_\_\_(Child's Name) who desires to be a participant in the City of Bonney Lake/Sumner Bonney-Lake School District (Joint Recreation Program) sponsored recreational activity of FIELD TRIP which will include vehicular transportation provided by the Joint Recreation Program.

I (we) understand there are special dangers and risks inherent not only in this activity but in being transported by vehicle, including but not limited to, the risk of serious physical injury, death or other harmful consequences which may arise directly or indirectly from the child's participation in this activity or being transported by vehicle to and from the activity. Furthermore, I have been advised via this document that the Joint Recreation Program does not provide Uninsured, Underinsured, Med Pay or Personal Injury Protection Coverage. Being fully informed as to these risks and in consideration of the Joint Recreation Program allowing my child to participate in this sponsored activity and/or use of Joint Recreation Program facilities and/or being transported, I (we), on behalf of myself (ourselves) and on behalf of the above-named participant child, assume all risk of injury, damage and harm to the child which may arise from the child's participation in the activities, use of the Joint Recreation Program facilities and/or transportation to and from the activity. I (we) further agree, individually and on behalf of the above-named child, to release and hold harmless the City of Bonney Lake and the Sumner Bonney-Lake School District and the Joint Recreation Program, its officials, employees, volunteers and agents and agree to waive any right of recovery that I (we) may have to bring a claim or lawsuit for damages against the City of Bonney Lake, Sumner Bonney-Lake School District and/or the Joint Recreation Program for any personal injury, death or other harmful consequences occurring to the above-named child or me arising out of the Child's voluntary participation in this activity and/or being transported to and from the activity. I (we) grant my(our) full and voluntary consent for the above-named child to participate in the activity described above and to be transported to and from the activity.

I hereby consent to allow my child's picture or likeness to appear in any official document, Joint Recreation Program website, sponsor advertisement and/or Joint Recreation Program produced television coverage of sponsored recreational activity without compensation to me.

(parent/guardian initials) \_\_\_\_\_ Initials confirm acceptance of the conditions set forth in this release.

I authorize any necessary emergency medical treatment that might be required for this child in the event of physical injury and/or accident to this child while participating in this activity.

(parent/guardian initials) \_\_\_\_\_ Initials confirm acceptance of the conditions set forth in this release.

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Printed name of Parent(s)/Legal Guardian(s) Date

Signature of Parent(s)/Legal Guardian(s) Email

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

Parent(s)/Legal Guardian(s) Address Phone

Please check when:

I have read and understand all sections within the Action Day Camp Handbook. I am aware that I will be held accountable for each section set forth and will contact day camp coordinator or site director if any questions arise regarding the policies and procedures.

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Print Name of Parent/Guardian

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Signature of Parent/Guardian

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Date

By signing the above, I hereby waive and release any and all rights and claims that may be had or might arise against The City of Bonney Lake or the Sumner/Bonney Lake School District Recreation Department, rental agencies, agents, or representatives for any and all losses suffered while competing in or in connection with the programs sponsored or co-sponsored by the City of Bonney Lake/Sumner School District Recreation Department. The City of Bonney Lake or the Sumner/Bonney Lake School District Recreation Department is not responsible for any articles lost or stolen. I also allow photographs to be taken during Recreation activities to be used in the promotion of future Recreation programs.