

PARENTAL WAIVER AND CONSENT FORM

As the parent or legal guardian of the child named below, I hereby give my full consent and approval for my child to participate in the Hackensack Summer Playground Program, (which includes Summer Playground Program, Adventure Camp and Theater Camp).

I understand that there are certain risks of injury inherent during the course of activities, as well as in traveling and other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in the designated program and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below.

In addition to giving my full consent for my child's participation, I do hereby waive, release and hold harmless the organization named below, its officers, coaches, sponsors, supervisors and representatives for any injury that may be suffered by my child in the normal course of participation in the designated program and the activities incidental thereto, whether the result of negligence or any other cause.

Designated Program: _____

Sponsored by: Hackensack Recreation Dept.

Child's Name: _____ **D.O.B.:** _____

Address: _____

Please list any physical limitations (allergies, hearing, sight, etc.):

PLEASE NOTE:

If a child is written up for a behavioral incident three times, he/she will be dismissed from Camp with no Refund.

Parent/Guardian Signature: _____ **Date:** _____