

CAMPER REGISTRATION FORM

Child's Name:		Age:	
Parent's Names: Mother_		Father	
Address:			
E-mail Address Can we add you to the e-n	ewsletter to learn	about more prograi	ms: Yes No
Best phone number to rea	ch you:		
T-Shirt Size (please circle):		Medium Large Medium Large	-
Summer Dates: June 2 nd to 6 th July 14th-18th *Fees non-refundable 30 days	July 28 th to A	August 1 st	th
Does your child have any a	llergies to medicat	ions, foods, insects	, animals, etc.?
Please list any prescription	medications that	your child is taking:	
Please list any physical or l	earning disabilities	that we should be	aware of:
Emergency Contact: Name:			
Best Phone Number: Who is authorized to pick (
ID will be required at pick up			
Parent Signature:		Date: _	

Parent Signature: _______ Signed waivers are required to participate in camp.

KIDS AND CANINES

Believing in Kids • Empowering Lives • One Dog at a Time

Release and Waiver of Liability and Consent to Publicize

Kids and Canines, Inc., a community based and not-for-profit corporation, ("Kids and Canines") that offers programs to youth. These programs include teen dog training and reading programs for children and community outreach programs that utilize our dogs while in training.

Program participants agree to the following terms:

1. <u>Assumption of the Risk.</u> As a Participant with Kids and Canines my time may include activities that could come with a risk. I agree to assume and accept the risks associated with the Activities.

2. <u>Release, Waiver, and Indemnification</u>. As a participant I hereby RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, INDEMNIFY, AND COVENANT NOT TO SUE Kids and Canines, its officers, directors, owners, employees, sponsors or volunteers (collectively, the "Released Parties") for all liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense, including court costs and attorneys' fees of any kind or nature ("Liability") which may arise out of, result from, or relate to the Participant's attendance or involvement in the activities.

3. <u>Insurance / Medical Treatment.</u> I understand that Kids and Canines disclaims responsibility for providing any type of insurance, including but not limited to health, medical, disability, automobile, or liability insurance coverage the Participant. I understand that I will be personally responsible for any and all costs associated with a personal injury or illness that may occur while the Participant is involved in any Activity at Kids and Canines. I hereby provide express permission to the Released Parties to seek and/or administer first-aid or emergency medical care at the time of the emergency.

4. <u>Consent to Publicize.</u> I hereby authorize Kids and Canines to publish, print, display or otherwise publicly use for purposes of trade or for any commercial or advertising purpose the name, portrait, photograph, or other likeness of the Participant.

5. <u>Governing Law, Interpretation, and Entire Agreement</u>. Any disputes arising or relating to this agreement shall be governed by Florida law. I agree that that this Release and Waiver of Liability and Consent to Publicize is intended to be as broad and inclusive as the laws of the State of Florida allow. I agree that if any portion of this agreement is held unenforceable, invalid, or void, the offending portion shall be severed and the balance of the agreement shall remain in full force and effect. I further agree that no oral representations, statements, or inducements apart from the foregoing written agreement have been made.

I hereby warrant that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up legal rights by signing it (including the rights of my spouse, children, parents, guardians, heirs, and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns). I have signed this Agreement freely and voluntarily. You have the right to refuse to sign this form, and the released parties have the right to refuse to let your child participate if you do not sign.

DATE:		
NAME OF PARTICIPANT		
(PRINT):		
NAME OF GUARDIAN /		
PARENT:		
SIGNATURE OF GUARDIAN /		
PARENT:		
PARENT EMAIL:	PARENT	
PHONE:		

To keep you updated on events and news at Kids and Canines you will receive regular correspondence. • You can opt out now by checking this box, or at any time by unsubscribing.