

RELEASE BY PARENT OR GUARDIAN

I _____, AM THE NATURAL PARENT
parent
AND/OR GUARDIAN OF THE MINOR CHILD _____
Child

WHOSE BIRTHDAY IS _____.
BIRTHDAY

BY VIRTUE OF AND IN CONSIDERATION OF THE CITY OF BROOKHAVEN
AND ITS DEPARTMENT OF RECREATION ALLOWING MY MINOR CHILD TO
PARTICIPATE IN THE FOLLOWING RECREATIONAL ACTIVITY, TO-
WIT: GYMNASTICS

I DO HEREBY, ON BEHALF ON MY MINOR CHILD, RELEASE SAID CITY
AND DEPARTMENT FROM ANY RESPONSIBILITY FOR ANY HARM OR
INJURY, (OR ANY LIABILITY WHICH MAY RESULT THEREFROM) WHICH
SAID CHILD MAY EXPERIENCE OR SUFFER FROM WHILE
PARTICIPATING IN OR ATTENDING A RECREATIONAL ACTIVITY
SPONSORED, OPERATED OR CREATED BY SAID CITY AND DEPARTMENT.

I FURTHER RECOGNIZE AND ACKNOWLEDGE THAT THE SAID CITY AND
DEPARTMENT WILL PROVIDE NO HEALTH AND ACCIDENT INSURANCE
FOR MY CHILD TO COVER MY CHILD FROM BODILY INJURY HE/SHE
MAY SUFFER WHILE PARTICIPATING IN THE CITY AND DEPARTMENT
RECREATIONAL ACTIVITIES. I HAVE READ AND UNDERSTOOD THE
ABOVE RELEASE AND AGREE TO ITS TERMS.

SIGNED _____

DATE _____