



**RELEASE, PHOTO AGREEMENT, PAYMENT AGREEMENT BY PARENT OR GUARDIAN**

I \_\_\_\_\_, AM THE NATURAL PARENT AND/OR  
PARENT  
GUARDIAN OF THE MINOR 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:

BALLET

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. THE RECREATION DEPARTMENT HAS PERMISSION TO USE ANY PHOTOGRAPHY  
TAKEN DURING THE CLASSES FOR PUBLICITY PURPOSES. I AGREE TO PAY MONTHLY  
TUITION UNTIL I HAVE NOTIFY THE RECREATION DEPT. IN WRITING. I HAVE READ AND  
AGREE TO THE BROOKHAVEN RECREATION DEPARTMENT POLICY THAT IS ATTACHED.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_