

WAIVER

Assigned Safety #



CHILDREN'S CENTER

1812 H. Pulaski Hwy., Edgewood, MD 21040
410-676-1212 or 410-688-3021



In consideration of being allowed to enter the play area and/or participate in any party and/or program at The S.C.U.B.E. D.O. Children's Center of Edgewood, Maryland, the undersigned, on his or her behalf, and on the behalf of the participant (s) identified below, acknowledges, appreciates and agreed to the following conditions:

I represent that I am the parent or legal guardian of the participant(s) named below, or I have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any party and/or program at The S.C.U.B.E. D.O. Children's Center. In addition, if I observe any hazard during our participation, I will bring it to the attention of the nearest S.C.U.B.E. D.O. employee or official immediately;

I am aware that there are inherent risks associated with participation in The S.C.U.B.E. D.O. Children's Center programs, parties, and/or use of the play arena and inflatable equipment and I, on behalf of myself and the participant(s) named below, knowingly and freely assume all such risk, both known and unknown, including those that may arise out of negligence of other participants: and, I for myself and the participant(s) named below, and our respective heirs, assigns, administrators, personal representatives, and next of kin, hereby release and hold harmless, The S.C.U.B.E. D.O. Children's Center, Extreme Family Outreach, Connection Community Church, Management, their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all S.C.U.B.E. D.O. Programs, activities, parties, the use of the play area and/or inflatable equipment.

Please note: This form will remain on file and function as permission anytime your child/children attends the S.C.U.B.E. D.O. Children's Center programs/event or until rescinded in writing by a parent or guardian.

Participant Name

Participant Date of Birth

Participant Name

Participant Date of Birth

Participant Name

Participant Date of Birth

Participant Name

Participant Date of Birth

Today's Date

Emergency Contact Phone #1

Parent/Guardian Signature

Emergency Contact Phone #2

Address

City State Zip