

KidOne Camps Authorization and Release

_____ I hereby authorize _____ (my child or ward, the “child”) to participate in the KidOne camp and in all activities involved with the camp.

_____ I understand that my child or ward will be under the supervision and care of the KidOne staff.

_____ I understand that I must identify any behavioral and/or health concerns to the KidOne staff prior to the day of the program.

_____ I hereby release, and agree to indemnify and hold harmless, KidOne, and all its directors, employees, agents and representatives from and against any and all liabilities, loss, or damage to persons or property which may occur in connection with the program, to the fullest extent permitted by law.

_____ I agree to assume all risks associated with my child’s participation in the camp.

_____ I give permission for my child to be photographed and/or videotaped for promotional purposes.

Signature of Parent _____

Date _____

Printed name of parent/guardian _____

Printed name of participant _____

Participant Age _____

Camp Dates _____