



Summer Camp Waiver

Child First Name: _____

Child Last Name: _____

Address: _____

City: _____ State: _____

Zip: _____

Phone: _____

Email: _____

Emergency Contact:

First Name: _____

Last Name: _____

Phone: _____

Relationship: _____

Waiver and Release

I acknowledge that participating in any of these programs involves certain risks (some of which I may not fully appreciate) and that illness, disease, infection, injuries, including permanent disability, paralysis and death, property damage or other harm could occur to me and others by my own actions or inactions. I accept and voluntarily incur all risks of any illness, disease, infection, injuries, damages, or harm which arise during or result from my participation in the program, including any associated travel, regardless of whether or not caused in whole or in part by negligence or other fault of MRC, and/or its board members, affiliates, employees, volunteers, insurers, partners, or interns ("Released Parties").

I waive all claims against any of the Released Parties for any injuries, damages, losses or claims, whether known and unknown, which arise during or result from my participation in the program, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I release and forever discharge the Released Parties from all such claims.

I agree to indemnify and hold harmless the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorney's fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of claims or suits that I (or anyone else claiming by under or through me) may bring against any of the Released Parties to recover losses, liabilities, costs, damages, or expense which arise during or result from my participation in the program, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

Parent/Guardian Signature: _____

Consent to Use Name, Photograph, Film, or Audio

I (together with my parent or guardian, if I am under the age of (18) or under legal disability) hereby consent to the use of the individual name and contact information listed above, the use of audio, the use of quotes, and the taking of photographs, movies or video tapes of the individual named above by the Marine Resources Council. I also grant to the Marine Resources Council the right to edit, use, and reuse said products for non-profit purposes including use in database management, membership/fundraising drives, print, on the internet, and all other forms of media. I hereby release the Marine Resources Council and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

YES

NO

Parent/Guardian Signature: _____ **Date:** _____