

Forsyth County Public Library Waiver, Release of Claims, and Permission Slip

Please check all boxes that apply.

☐ In exchange for me and/or my child(ren), named here _____, being allowed to participate in the _____ program. I agree to waive, release, and forever discharge any and all claims, rights, and causes of action against Forsyth County and its representative officers, officials, employees, and agents for injury or damage caused or alleged to be caused as a result of my or my child(ren)'s participation in the above-referenced program.

☐ My signature certifies that I grant permission for my child(ren) to participate and further, will assure that, if dropped off at the library, my child(ren) will know the arrangements for getting home in a safe and timely way. Per Library Policy #11, "Leaving children under the age of 8 unattended by a caregiver is not allowed in a Forsyth County Public Library."

Food and Beverage Consumption

☐ I agree to this waiver and release. I understand and voluntarily assume all risks associated with my and/or my child(ren)'s participation in the above-referenced program, including the possibility of accidental or other physical injury (including food/beverage consumption) during the program and/or participation in programs, conducted by the Forsyth County Public Library system, including programs co-sponsored by other agencies.

☐ This waiver and release of all claims and assumption of risk is intended to be as broad and inclusive as permitted by the laws of North Carolina. If any portion of this document is held invalid, the remainder shall continue in full force and effect.

Please check age of participant(s):

- ☐ Adult (18 years and older)
- ☐ Teen (13-17 years-old)
- ☐ Youth (5-12 years-old) (Parent/Guardian)

Signature: _____

Print Name: _____

Location: _____

Emergency Contact Number: _____

Phone Number: _____

Email: _____

