

Geocaching Program Permission Form

Each participant must fill out and hand in a permission form to the Library **before** the program.
The program will be held **[date, time]**.

Full Name _____

Address _____ City _____

Phone Number _____

School _____ Age _____

E-Mail _____

Emergency Contact Name _____

Phone Number(s) _____

Do you have any medical conditions that we need to be aware of, in case an emergency should arise during the program, such as Asthma, Epilepsy, Heart Condition, or other serious conditions (Emergency inhalers, epi-pens, etc. should be carried at all times):

Allergies/Allergic to (if any): _____

Medications (if any): _____

I give my child _____ permission to participate the GPS/Geocaching Program (hereinafter referred to as the “Program”) sponsored by **[library name]**. I acknowledge and agree, on my own behalf and on behalf of the minor, that such participation subjects Minor to the possibility of physical illness or injury (minimal, serious, catastrophic, and/or death) and that I, on my own behalf and on behalf of the minor acknowledge that the Minor is assuming the risk of such illness or injury by participating in the Program. In the event of such illness or injury, I authorize **[library name]** to obtain necessary medical treatment for the Minor and hereby, on my own behalf and on behalf of the Minor, release and hold harmless **[library name]**, the hosting sites, on whose premises the Program will occur, and any and all respective directors, board members, agents and employees of **[library name]** (hereinafter collectively “Releasees”) in the exercise of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of the Minor for any illness or injury that the Minor may sustain during the Programs and from traveling from program site to program site.

I, on my own behalf and on behalf of the Minor, further agree to release and to hold harmless Releasees from any and all liability for negligence or any other claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney’s fees and costs) arising out of or connected with the Program, including any claim arising out of or connected with any illness or injury that the Minor may incur or sustain during the Program, all activities associated with the Program, and while traveling between program sites. I further expressly agree to indemnify and hold harmless Releasees and Releasee’s heirs, successors, assigns, executors, employees, and administrators against loss from any further claims, demands, or actions that may subsequently be brought by Minor or by any other person or persons on account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss, damage or costs Releasees may have to pay as a result of any such action, claim, or demand.

Signature of Parent or Legal Guardian Date

I, identified above as Minor, acknowledge that I have read this release form.
