

PHONE NUMBER: _____

MINOR Participant Waiver & Release Form Gumbo Limbo Nature Center

PROGRAM	DATE:
Boca Raton Beach & Park District, Friends of Gumbo Limbo, any claim against the City of Boca Raton, Greater Boca Raton	n Beach & Park District, Friends of Gumbo Limbo, and School mployees, hereafter arising from injuries to said child, which ig in said activities or being transported there from or there in part by the negligence of said City of Boca Raton, Greater and School District of Palm Beach County or by the of Boca Raton, Greater Boca Raton Beach & Park District, County, and I do covenant to indemnify, hold harmless and ch & Park District, Friends of Gumbo Limbo, and School oyees from any claim, damages or demand hereafter the each & Park District, Friends of Gumbo Limbo, and School ents, servants and employees of the City of Boca Raton,
At various times, the City of Boca Raton, Greater Boca Rator District of Palm Beach County videotapes and photographs of Boca Raton Beach & Park District, Friends of Gumbo Limbo, material, or Channel 20, the City's access station. By enterin program, you hereby authorize City of Boca Raton, Greater I and School District of Palm Beach County to reproduce, copy videotapes and/or audio tapes or photographs.	events to be broadcast on the City of Boca Raton, Greater and School District of Palm Beach County's website, printed g yourself or your child in the above-mentioned City Boca Raton Beach & Park District, Friends of Gumbo Limbo,
I hereby give my permission for the City of Boca Raton, Greatimbo, and School District of Palm Beach County to call my pain the event of any injury to said child, although I understand Park District, Friends of Gumbo Limbo, and School District of	ohysician and/or to arrange for transportation to a hospital d that the City of Boca Raton, Greater Boca Raton Beach &
I HAVE READ AND FULLY UNDERSTAND THE ABOVE DISCLAIN	MER STATEMENT AND WAIVE AND RELEASE ALL CLAIMS.
DATE:	
NAME OF MINOR:	
PARENT / LEGALGUARDIAN: Print	
Sign	