



Oak Lawn Park District FLASH Waiver, Release of All Claims & Assumption of Risk

The Oak Lawn Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Oak Lawn Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety.

I am the parent or legal guardian of my minor child/ward _____, (hereinafter the "minor") who will be participating in the FLASH program at the Oak Lawn Park District, (hereinafter the "Program"). I recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

I understand that I am solely responsible for determining whether the minor is physically fit and has reached the skill level necessary to safely participate in the Program and I affirm that the minor may safely participate in this program. I further acknowledge that I have received, read, and understand the Parent Handbook for the FLASH program and fully agree to its terms, policies, and procedures.

WARNING OF RISK

Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Oak Lawn Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the FLASH Program, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Oak Lawn Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PHOTO/VIDEO AUTHORIZATION AND CONSENT

I hereby authorize and give my consent to the Park District to photograph/video the minor, and without limitation, to use such photographs/video in connection with promoting/advertising the services, programs, and facilities of the Park District (including website promotions) without consideration of any kind.

I have read and fully understand the above assumption of risk, waiver and release of all claims and photo/video authorization and consent. I swear or affirm that I am the parent or legal guardian of the minor I am enrolling in the FLASH program of the Oak Lawn Park District, and that I have legal authority to enroll the minor in this program and to authorize emergency medical treatment for the minor.

SIGNATURE OF PARENT/LEGAL GUARDIAN: _____

Date: _____