

Bradford Parks & Recreation
172 N. Main St
Bradford, VT 05033



**MINOR Waiver/Release FOR PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above for the Town of Bradford, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Town of Bradford from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE to the fullest extent permitted by law. , I authorize that necessary medical attention is given to me or my child by a qualified physician in the event I cannot be reached.

Participant's Name _____ D.O.B. _____ Age ____ Grade _____
Address _____
Home Phone _____ Day Phone _____ Cell Phone _____
Parent's/Guardian's Name _____
Parent's/Guardian's Email _____
Allergies/ Medical Concerns/ Medications _____

Emergency Contact _____ Phone _____ Cell _____
Emergency Contact _____ Phone _____ Cell _____

Program Signing Up For: _____ Program Fee: _____

Parent/ Guardian Signature _____ Date _____

Check or Cash is accepted for payment and must be received prior to enrolling in the program.

~ Picture Release~

From time to time the Valley News, Journal Opinion, and other photographers attend Parks & Recreation Department activities and take photos and/or videos of program participants for publication (print, web, Facebook).

By signing below, I authorize the Bradford Parks & Recreation and others to be able to photograph and use photos of myself or my child for newspaper articles, brochures, the town website, and other appropriate publications. If unsigned then I do not authorize the above.

Parent/ Guardian Signature _____ Date _____