



KIDS IN CONSERVATION

PERMISSION FORM & WAIVER

The undersigned hereby acknowledges that participation in recreational and other activities conducted by or in conjunction with the Norcross Garden Club, Gardens for Growing Community, USDA/NRCS and the Gwinnett Soil and Water Conservation District (hereafter known as "KIDS IN CONSERVATION WORKSHOPS"), and travel to and from such activities, involves inherent risks of physical injury, illnesses, death, or loss of personal property, and the undersigned also understands that some injuries may require special treatment, personnel, and equipment which may be remote either by time or distance, or both, from the activity site, nonetheless, the undersigned agrees to proceed with these activities.

In consideration of the mutual benefits derived from participation by the undersigned with activities conducted by or in conjunction with KIDS IN CONSERVATION WORKSHOPS, the undersigned hereby absolves, releases and waives any and all liability, claims, or demands against the KIDS IN CONSERVATION WORKSHOPS and its officers, directors, agents, trip leaders, and employees from any and all claims, demands, rights and causes of action of whatsoever kind and nature arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, including death, damage to property, and the consequences thereof resulting from or relating to participation by the undersigned in any activities conducted by or in conjunction with the KIDS IN CONSERVATION WORKSHOPS. The undersigned hereby acknowledges that any person or participant who uses his property or loans to another his property for use on or in land, water, or air at the KIDS IN CONSERVATION WORKSHOPS or any event or function in conjunction therewith does so at the individual's own risk and such participant waives any and all claims against the KIDS IN CONSERVATION WORKSHOPS regardless of who uses or causes any damage to said property.

I understand that the KIDS IN CONSERVATION WORKSHOPS does not provide health insurance for participants in its activities and the undersigned is required to and shall carry such insurance adequate for any eventuality for injury or illness as a result of such activities.

I agree that any photos taken of during these workshops may be used for general publicity purposes associated with activities promoting the KIDS IN CONSERVATION WORKSHOPS and that participants will NOT be identified by name in any photo without that participant's express consent or that of his or her parent and/or guardian.

I certify that I am eighteen (18) years of age or older, or my parent and/or guardian has signed below and that I, or my parent and/or guardian have read the above carefully before signing.

DATE: _____

PARTICIPANT NAME: _____
(Please print child's name)

AUTHORIZED BY: _____
Printed Name of Participant or Parent/Guardian

AUTHORIZED BY: _____
Signature of Participant or Parent/Guardian

EMERGENCY CONTACT INFO _____
Contact name/relationship cell phone #

EMAIL ADDRESS of parent and/or guardian (to send any updates regarding change in venue due to weather, or other conditional information.)
