Cairo Summer Recreation Program

July 9th - August 16th 2024 Registration Packet

Child's Name	
Date of Birth	Grade entering in the fall
Address	
Parent/Guardian Contact	
Name	
Address (if different from child)	
Phone	Cell Phone
Email	

Authorized Pick up and Emergency Contact

Name	Name
Relationship to child	Relationship to child
Phone	Phone
Cell Phone	Cell Phone

Child's Medical Information**

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Insurance Group Name	_Insurance ID number
Physician's Name	_ Phone
List any allergies, medical conditions, or other conditions, which counselors should be made aware. Use a separate	-
**Provide copy of child's current i	mmunization record

I give permission for my child to ride their	I give permission for my child to be
bike*, walk, or skate* on their own to Cairo	photographed for local newspaper articles
Summer Recreation. *helmet must be worn	and displays at local events.
□ _{Yes}	□ _{Yes}
□ _{No}	□ _{No}

I_____, being the parent/guardian of

_____, consent to her/his participation

in the Cairo Summer Recreation Program, including all off-site field trips.

Parent/Guardian Signature

Please carefully read and sign the following Release:

Cairo Summer Recreation Release and Waiver of Liability and Indemnity Agreement

Parent/Guardian Agreement

1. I hereby give permission for my child or children to attend the Cairo Summer Recreation (CSR) program operated by the Town of Cairo and to participate in all activities that are part of the program.

2. I agree to abide by all of the rules of the recreation program listed in the registration packet and to instruct my child(ren) to abide by all of the rules of the recreation program, whether listed above or communicated to them by CSR staff.

3. I understand that the Cairo Summer Recreation Program reserves the right to terminate services offered to my child for any reason which in its INDEPENDENT judgment makes such a decision appropriate including but not limited to insufficient enrollment, inclement weather forecasts, behavioral issues, or lack of resources to fund the programs.

4. I understand that there is an unavoidable risk of injury for any child participating in outdoor sports such as kickball, basketball, races, swimming, and similar activities. I hereby release, waive, discharge FROM LIABILITY and agree not to sue the Cairo Summer Recreation Prgram, its Directors, Officers, Employees, and Agents (hereinafter referred to as "releasees") from all liability to the undersigned or to the undersigned's children and all his or her personal representatives, assigns, heirs, and next of kin (hereinafter referred to as "releasors") for any loss or damage, and from any claim or demands therefore on account of any injury to the releasors or damage to property or resulting in the death of the releasors, whether caused by the negligence of the releasees or otherwise while the releasors or his or her children are in, upon, or about the premises or any facilities or equipment where the program is taking place or participating in any program affiliated with CSR.

5. I understand that there is an unavoidable risk of exposure to the Covid-19 virus and/or other contagious illnesses as a result of people gathering in groups. Releasors hereby release, waive, discharge and agree not to sue releasees from all liability to the releasors for any loss or damage, and any claim or demands therefore on account of any illness or injury suffered by any releasors, whether caused by the negligence of the releasees or otherwise while the releasors are in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with CSR.

6. I further expressly agree that this Release and Waiver of Liability and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State of New York and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

7. I have carefully read and am voluntarily signing this Release and Waiver of Liability and Indemnity Agreement, and I agree that no oral representation, statements or inducement apart from the foregoing written agreement have been made.

Signature off parent/guardian Date
