



Summer Recreation Program Participant
General Release of Liability Form
Volusia County Parks, Recreation and Culture

1. I hereby give consent for my child/ward, _____, to participate in a County of Volusia summer recreation program.

2. I understand I am enrolling my child/ward in a not-for-profit community recreation program intended to offer the opportunity for children to travel on field trips, exercise, engage in athletic activities and participate in other educational and recreational activities. I also understand that even if the County uses reasonable care in providing these activities, this program has inherent risks which could lead to injury to or death of participants which cannot be entirely avoided or eliminated, including, but not limited to, cuts, bruising, scrapes, sprains, broken bones and other physical injuries.

3. I HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE COUNTY OF VOLUSIA, ITS DIRECTORS, OFFICERS, AGENTS AND EMPLOYEES (HEREINAFTER REFERRED TO COLLECTIVELY AS "COUNTY"), FOR ALL LIABILITY TO MY CHILD/WARD AND/OR UNDERSIGNED, FOR ANY AND ALL LOSS, INJURY, DAMAGE, AND ANY ACTIONS, CLAIMS, DEMANDS, DAMAGES, COSTS OR EXPENSES, INCLUDING, BUT NOT LIMITED TO, NEGLIGENCE BY THE COUNTY, WHICH MY CHILD/WARD OR I MAY HAVE AGAINST THE COUNTY ARISING OUT OF, OR IN ANY WAY CONNECTED WITH, THE PARTICIPATION OF MY CHILD/WARD IN A COUNTY SUMMER RECREATION PROGRAM. I EXECUTE THIS FORM ON BEHALF OF MYSELF, MY CHILD/WARD AND MY/OUR HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN.

4. I understand that I have the right to not sign this form but that my child/ward will not be allowed to participate in a County summer recreation program until this form is executed by me. I also understand that the authorization and releases granted herein are voluntary and that I may revoke any or all of them at any time by revoking them in writing to the Director of Parks, Recreation and Culture Division at the following address:

Director of Parks, Recreation and Culture Division, County of Volusia
202 Florida Ave.
DeLand, FL 32720

5. I understand that this release is unconditional and full without any limitation or exclusion.

This completed form must be kept on file by the Parks, Recreation and Culture Division of the County of Volusia. This form is valid only for the calendar year in which it is executed.

Parent/Guardian Signature

Date

Print Name of Parent/Guardian

Date