

PERMISSION/WAIVER FORM

KEIZER POLICE BLAST CAMP

While the City of Keizer strives to minimize risk, it is impossible to completely eliminate it. Your child can increase the margin of safety by paying close attention to safety rules and procedures during this event. We encourage the child to participate in any and all activities and request that the child ask staff to explain unclear directions.

MEDICAL AUTHORIZATION AND CONSENT TO TREATMENT OF CHILD

The undersigned parent or legal guardian hereby authorizes City of Keizer personnel to consent to any emergency medical treatment of the child below named when such personnel deems advisable if a parent or legal guardian cannot reasonably be located when the child is in need of medical treatment. This authorization will be effective as of August 14, 2023, and will expire on August 16, 2023.

HAZARD/INJURY WAIVER

The undersigned parent or legal guardian is aware that certain risks are inherent in any kind of activity and hereby gives permission for the child below named to participate in any and all Keizer Police Blast Camp activities. The undersigned parent or legal guardian assumes all risks and hazards incidental to participation in such activities and does hereby waive, release, absolve, and agree to hold the City of Keizer, its officers, agents, and employees from any claim arising out of injury to said child.

PHOTO RELEASE

The undersigned parent or legal guardian hereby gives permission for the below named child's photo to be taken and possibly used by the City of Keizer and/or the local media to promote Keizer Police Blast Camp without compensation.

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I represent that I am the parent or authorized legal guardian of the named child, that I have read and understand the above terms, and that I agree to all terms listed above.

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

(Please **print**)

Parent/Legal Guardian's Name: \_\_\_\_\_

(Please **print**)

Parent/Legal Guardian's Address: \_\_\_\_\_

\_\_\_\_\_

Parent/Legal Guardian's Telephone Number: \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_