



Event Waiver

September 22, 2012

Project Time: 8:00am to 11:00am

Form must be submitted before September 7, 2012

I voluntarily agree to participate, or for my child to participate, in this project/event. I hereby waive, release, and hold harmless from any liability or claims for damages for personal injury, including death, as well as from claims or property damage which may arise in connection with the above-named activity, against the supervisor, the City of Santa Clarita and their elected and appointed officials, agents, and employees. As parent/guardian, I hereby consent to treatment of my minor child for any and all medical procedures deemed necessary, as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment. I hereby give permission to the City of Santa Clarita Parks, Recreation, and Community Services Department to use my, or my children's, photographs as they see fit in their recreation brochure or other advertising. I understand all photographs belong to the City of Santa Clarita and I will not receive payment of any kind.

BE SURE TO PROVIDE ALL INFORMATION

Please use BLUE or BLACK ink - ONLY

T-Shirt Size (circle one)

S M L XL XXL

Name of Group/Organization: _____
(if applicable)

I, (Volunteer) _____ residing at
(Print Name)

(Print Street Address, City, and Zip Code)

Phone: _____ Email: _____

hereby agree to the Volunteer Agreement set forth on this _____ day of _____, 2012.

I am an adult ☐ Volunteer Signature: _____

I am a minor ☐ Parent/Guardian (if minor): _____
(Print Parent Name)

Parent/Guardian Signature: _____

Please return completed Event Waiver before September 7, 2012 to:

Santa Clarita Activities Center
Attn: Volunteer Programs
20880 Centre Pointe Parkway
Santa Clarita, CA 91350

- or -

Fax: (661) 250-3730
scoronel@santa-clarita.com