**HIGHTOWER TRAIL MIDDLE SCHOOL**

**SUMMER CAMP Sponsored by the HTMS Foundation**

We are excited that you are joining us for our Hightower Trail Husky Foundation Sponsored Camp.

The camp instructors have planned their sessions and are excited to share their different ideas. Everyone is hoping that each participant has a wonderful experience within the camp structure.

This is a **Husky Foundation sponsored event** and as such, if there are any questions or concerns, you would need to contact the Hightower Trail Husky Foundation at HTMSSummerCamp@gmail.com.

**Waiver and Release**

I am the parent or legal guardian of (Child’s name printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of my child attending the Summer Camp at Hightower Trail Middle School, I hereby agree to the

1. I acknowledge and agree that my child’s attendance at and use of School facilities and surrounding play areas could cause injury to my child. I hereby assume on behalf of my child, all risks of personal injury, death, property loss or other damages which may result from or arise out of attendance at the Summer Camp or use of the facilities and surrounding play areas. I understand and agree that the foregoing waiver of liability, given individually and on behalf of my child, shall apply to any and all claims against Hightower Trail Middle School, the Foundation and any faculty members for any such personal injuries, property loss or other damages connected to or arising out of the aforesaid risks.
2. I hereby, individually and on behalf of my child, fully and forever waive, release and discharge Hightower Trail Middle School, the Foundation and any faculty members from any and all claims, damages, demands, rights of action or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of my child’s attendance as described above, including those which arise out of the negligence of the school, and school faculty members. Further, I hereby, individually and on behalf of my child, release and discharge Hightower Trail Middle School, the Foundation and any faculty members, from any and all liability for any loss of, or theft of, or damage to personal property. I acknowledge and agree that I have carefully read this Waiver and Release and fully understand and agree it is a waiver and release of liability.

Child’s Name (Please Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian‘s Name (Please Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_