

# Mobile STEAAM Solutions 2025 Summer Enrichment Camp Liability Waiver/Release Form

### **Participant Information**

•	Child's Full Name:
•	Date of Birth (MM/DD/YYYY):
•	Parent/Guardian Name:
•	Parent/Guardian Phone:
•	Email:

# **Acknowledgment of Risk and Waiver of Liability**

I, the undersigned, as the parent or legal guardian of the above-named child (the "Participant"), hereby acknowledge, understand, and agree to the following terms and conditions as part of the Participant's involvement in the **Mobile STEAAM Solutions 2025 Summer Enrichment Camp** ("the Camp"):

# 1. Assumption of Risk

I understand that participation in the Camp, which includes but is not limited to science, technology, engineering, arts, mathematics, and movement (STEAAM) activities, may involve various physical activities, including outdoor exercises, hands-on experiments, and field trips. I acknowledge that there are inherent risks associated with these activities, including but not limited to injury, illness, accidents, and personal property damage.

I voluntarily assume full responsibility for any risks of loss, property damage, or personal injury, including death, that may result from the Participant's involvement in the Camp, whether caused by the negligence of the Camp staff, volunteers, or otherwise.

## 2. Release of Liability

In consideration of the Participant being permitted to participate in the Camp, I hereby release, waive, discharge, and hold harmless **Mobile STEAAM Solutions**, its directors, officers, employees, volunteers, and agents (collectively, "Released Parties") from any and all claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury (including death) that may be sustained by the Participant, or to any property belonging to the Participant, while participating in the Camp, whether caused by the negligence of the Released Parties or otherwise.

#### 3. Medical Treatment Authorization

In the event of an emergency or medical incident involving the Participant, I hereby give permission to the Camp staff to seek medical treatment for the Participant, including first aid care, CPR, and transport to a medical facility. I understand that I will be responsible for any and all medical expenses incurred.

#### 4. Photo/Video Release

I grant permission for **Mobile STEAAM Solutions** to take and use photographs and video recordings of the Participant during Camp activities for promotional, educational, or marketing purposes in print, digital, or electronic media. I understand that no compensation will be provided for the use of such images or recordings.

[]	l agree
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[] I do not agree

# 5. Behavioral Expectations

I understand that the Participant is expected to follow all Camp rules and regulations and to behave respectfully toward staff, volunteers, and other participants. I acknowledge that failure to comply with these rules may result in the removal of the Participant from the Camp without a refund of fees.

#### 6. Indemnification

I agree to indemnify and hold harmless the Released Parties from any and all claims, demands, or causes of action that may be brought against them by the Participant or any third party as a result of the Participant's actions, omissions, or conduct during the Camp.

# **Agreement and Signature**

I, the undersigned, certify that I am the parent or legal guardian of the Participant and that I have read, understood, and agree to the terms of this Liability Waiver/Release Form. I understand that by signing this form, I am waiving my right to bring any legal action against the Released Parties in the event of injury, death, or property damage.

•	Parent/Guardian Signature:
•	Parent/Guardian Printed Name:

_	Date:			
•	DAILE			

# **Emergency Contact Information**

•	<b>Emergency Contact Name:</b>	

Please return this form to camp staff no later than June 12, 2025.