

## WAIVER AND RELEASE FORM

## 2018/2019 Pavilion After School Program

## Please read carefully.

I,	, the Parent/Guardian of
	(Participant's Name) give my permission for him/her
to participate in the 2018/2019 Pavilie	on After School Program, sponsored by Greenville County
Parks, Recreation, & Tourism. I under	erstand the program activities may involve ice skating,
outdoor games, travel to and from spe	ecial activities, and other physical activities, which can
result in bodily injury.	
I,	, (Parent/Guardian) hereby release and hold harmless
Greenville County and Greenville Co	ounty Parks, Recreation, & Tourism, its agents, and
employees from any liability from an	y injuries or damages resulting from
(Parti	icipant's Name) participation in the 2018/2019 Pavilion
After School Program. I understand	photographs of participants may be taken during the
program and I give permission for Gi	reenville County Parks, Recreation, & Tourism to use those
photographs in publicity materials.	
Parent/Guardian's Signature	
Parent/Guardian's Printed Name _	
Date	