



5th GRADE FUN NIGHT/WILTON FAMILY YMCA WAIVER

I understand that the Wilton Family Y assumes no responsibility for injuries or illnesses which I may sustain as a result of my physical condition or resulting from my participation in 5th Grade Fun Night, the use of any equipment, exercise, or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses which may result from my participation in 5th Grade Fun Night. I hereby release and discharge the Wilton Family Y, its agents, servants and employees from any and all claims for injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities.

In an emergency, I authorize the Wilton Family Y to administer first aid by trained staff and to obtain emergency medical treatment for any person listed on this waiver. I understand the Wilton Ambulance Corp will be contacted for transportation to Norwalk Hospital Emergency Room. I accept responsibility for all fees incurred in the care and transportation.

I understand that the Wilton Family Y is not responsible for personal property lost or stolen while members and/or program participants are using the Y facilities or on Y premises.

I give my permission to the Wilton Family Y to use, without limitation or obligation, photographs, film footage, or tape recordings which may include my image or voice for promoting or interpreting Y programs.

I acknowledge the Waiver and accept the Policies set forth above.

Name of Participant: _____

Signature of Parent/Guardian

Print Full Name

Date