**Waiver and Release –Fresh Air Family Camp**

*I declare that my child is in good physical condition for this event and I undertake it at my own risk. I understand there are certain risks and dangers inherent in participating in this event with the knowledge of the dangers that are obvious and/or possibly hidden. I hereby unconditionally release Fresh Air Family, The Birmingham Botanical Gardens, Ruffner Mountain Nature Preserve, Red Mountain Park, Tannehill Historical Park, Trussville Athletic Center, The Oaks at Parkwood, The Village at Cook Springs, Shaker Village at Pleasant Hill, the Montessori School of Huntsville, The Huntsville Botanical Gardens, The Alabama Gulf Coast Zoo and any person and/or entity providing any instruction and/or funding for the above-identified camp, and their employees, officers, directors, volunteers and representatives from any and all claims and liability that may result or arise, directly or indirectly from my child’s participation in these activities and associated activities at all Fresh Air Family events. I hereby grant permission for any use of photographs of this event for any purpose.*

*I do hereby, of my own free will, voluntarily release, discharge and agree to save and hold harmless and indemnify said parties or anyone in acting in their behalf from any and all liability claims, demands or causes of action of any type arising out or related to any loss, damage or injury, including my death, that may be sustained by me while on or about said events from any cause of any type, known or unknown, whether due to the negligence of parties or anyone acting in their behalf. I make this release to bind any of my heirs or representatives of my estate. (If applicable: I hereby certify that I have read the foregoing waiver and release and consent of my child’s/ward’s participation in this event and on all Fresh Air Family events, and any associated activities in accordance with the terms of said waiver and release.)*

*I agree to be completely responsible for the care and well being of my child (children), and I further agree to indemnify Fresh Air Family and their employees, officers, directors, volunteers, and representatives against any and all loss which may occur as a result of an injury of said child (children).*

***(Please Print)***

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_Zip \_\_\_\_\_\_\_\_\_\_**

**Family Members Attending Event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you a Fresh Air Family member? \_\_\_\_Yes\_\_\_\_No
Would you like information on other Fresh Air Family Events? \_\_\_\_Yes\_\_\_\_No**

**Signature of Responsible Party: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Witness:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_**

P.O. Box 321038, Birmingham, Alabama 35232 www.freshairfamily.org