



Journey Summer Camp Waiver of Liability

By signing below for your child, a Journey Summer Camp participant, you are agreeing to the following for you and your child:

- I agree to follow all rules and instructions set forth by Versailles-Woodford County Parks and Recreation, Falling Springs Center and its employees.
- I realize there is an inherent risk when using any play structure or playground located in any of the parks.
- I understand that by signing this waiver I'm giving Falling Springs Center and the Versailles-Woodford County Parks my permission to use any photos or videos that may contain my image, or images of any minors in my household, for promotional means.
- I, the undersigned, hereby waive any and all claims that I may have against the Versailles-Woodford County Parks and Recreation Department, Woodford County Fiscal Court or the City of Versailles and the agents, employees, directors, board members, magistrates, council members, and officers of these entities for any loss I may suffer arising out of the use of the facilities both inside and outside of the Falling Springs Arts and Recreation Center. I agree to indemnify and hold harmless the above parties from and against any and all liability for damages arising from injuries to my person or damage to my property occasioned by any acts or omissions of the above parties including all expenses, legal or otherwise.

Child's Name (please print) _____

Parent's Name (please print) _____

Parent's Signature _____

Date _____