



TEEN CENTER PASS

Teen's Name _____ Birth date _____ Grade: _____

Street Address _____ City _____

Mailing Address _____ City _____ Zip _____

Teen's Email & Phone: _____

Guardian/Parent Email: _____

1st Contact-Guardian/Parent Name & Phone # _____

2nd Contact-Guardian/Parent Name & Phone# _____

Lincoln Parks & Recreation Assumption of Risk Release & Waiver of Liability / TEEN

Assumption of Risk: Thank you for your cautious and thoughtful participation in Lincoln City Parks and Recreation (LCPR) programs and use of our equipment. It is important you are aware that participation in recreational activities and athletic programs sponsored by LCPR may involve substantial risk of bodily or personal injury or other physical dangers. **Please review this document carefully and sign below to acknowledge and agree to the following:**

- I intend to voluntarily participate in Teen Center programs offered by LCPR.
- I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury sustained through my participation in these voluntary athletic or recreational activities.

Release/Waiver of Liability: By my signature below I also agree on my own behalf as well as his/her heirs, executors, administrators and assigns, that in exchange for the consideration of the enrichment I expect to gain from his/her/their participation in the exercise, sports and/or recreation programs and for LCPR allowing such participation; to waive, release and hold harmless, covenant not to sue and forever discharge the City of Lincoln City, its employees, volunteers and elected officials from any and all claims, demands, rights, causes of action, judgments, costs or any other liability of any kind resulting from my participation in such activities and programs, including all known or unknown and foreseen or unforeseen bodily or personal injuries.

Information and Request for Assistance: The facilities and programs offered by the LCPR have been designed and established to provide the optimum level of beneficial activity and enjoyment without compromising the health and safety of those who use them. However, due to the nature of the programs, activities and equipment made available by the LCPR, if there is an inherent risk. This results in a practical limitation on the LCPR in its effort to prevent bodily and personal injury.

PHOTO POLICY: Lincoln City Parks & Recreation (LCPR) reserves the right to photograph classes, programs, and participants at any of our facilities and properties or any sponsored activity. Please be aware that these photos are for promotional purposes and may be used in future publications and media communications in any format. If you do not wish to be photographed, please inform staff and we will make reasonable efforts to honor your request. If you see staff taking pictures, and you do not wish to be photographed, please let us know. If you see a photo of yourself or a family member that causes you concern, please notify us. As a courtesy, we will make every reasonable effort to dispose of the image, and will not use it in future publications. However, we will not be able to retrieve, destroy or discontinue existing printed publications in which the photograph may have been included.

Print Participant Name

Print Parent/Guardian Name

Parent/Guardian Signature

Date