



LHY – Mountain Creek – Mental Health Association

GRIT 'n Snow 23-24 Waiver

Name of Participant \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

(Print Clearly)

Guardian's Name \_\_\_\_\_ Guardian's Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contacts:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

AGREEMENT

- 1. I, the undersigned guardian having legal custody/guardianship of the above said minor, give permission for the minor to participate in the GRIT 'n Snow Program
2. The minor is physically able and mentally able to participate in all activities as described in the description for the program.
3. I am aware that participating in any sport can be a dangerous activity, involving many risks of injury including, but limited to: neck injuries, spinal injuries, and death.
4. I assume all risk(s) and hazards associated with participation in this program and will not hold the YMCA or Mountain Creek and their staff liable.
5. I authorize the YMCA and Mountain Creek and its staff to obtain medical treatment for said minor in the event that a parent or emergency contact cannot be reached.
6. I will be responsible for any medical or other charges in connection with my child's involvement in the program.
7. I support the Lakeland Hills Family YMCA Youth Program philosophy which encourages fun, safety, participation, physical fitness, health, skill development, teamwork, fair play, and positive family involvement.
8. I hereby give consent to the Lakeland Hills YMCA, Mountain Creek, and the Mental Health Association to allow photographs of said minor and that they may be used in the future for advertising purposes.
9. I permit said minor to travel by chartered automobile to activities and events related to the program.
10. I understand said minor MUST attend a minimum of 2 out of the 3 of the indoor sessions at the Y in order to be eligible to go on the trips to Mountain Creek.
10. I understand that this signed waiver must be returned by before the program starts to complete my child's registration so that they may participate in the program.
11. I have read this waiver and agree to the contents.

Parent/Guardian Signature

Date