



Guardian Name:		Child's Name:	
Address:		Phone:	
Email:		Grade:	
Check each event you will attend:			
September 8- Family Kickball Tournament (6pm) Cincinnati Orchestra Concert (7pm)		November 10-Arty Party (canvas painting- \$15.00/painter) At Community Center (6pm)	
October 13- Nature Walk and Scavenger Hunt (6pm)		December 8- Cardboard Car Craft (6pm)	

***The only cost associated with this program will be for the Arty Party paint night. Please make all checks payable to Arty Party. Payment is due with Registration.**

As a participant in the Fort Thomas Recreation Department "Tech-Free Tuesday", I recognize and acknowledge that there are certain risks of injury and I waive and relinquish all claims I or my child may have as a result of participation in this program against the City of Fort Thomas, Fort Thomas Recreation Department, and its' officials (either elected or appointed), commissioners, officers, agents, employees, and volunteers.

I, the undersigned, understand and acknowledge that participation in a recreational activity can be hazardous and I realize that no one should enter into a recreation activity unless the participant is medically able. I/We assume all risk associated with this activity, including, but not limited to: falls, contact with other participants or equipment, effects of weather, equipment failure, and condition of playing area. I fully understand that it is my responsibility to ascertain if this specific activity contains other elements of risk that could prove to be harmful of a participant.

Having read this waiver and in consideration of acceptance of entry into the program, I and anyone entitle to act on my behalf, waive and release the City of Fort Thomas, Fort Thomas Recreation Department Staff, and its' Co-Sponsors, their representatives and successors from all and against any claims, suits, or cause of actions, including reasonable attorney's fees, sustained or cause by myself or my child arising out of, in connection with, or in any way associated with the activities of this program.

Print Guardian Name: _____ Date: _____

Guardian Signature: _____ Date: _____

Kickball Roster:

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- 3
- 4
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- 9
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- 11
- 12

