

Northville Park Kids' Night – Waiver

Food allergies: _____

Child's name _____ Age _____ _____

Child's name _____ Age _____ _____

Child's name _____ Age _____ _____

Liability Waiver -- Must Be Signed By Legal Guardian

My children are of acceptable behavior and medically able to be at Kids' Night. I assume all risks associated with Kids' Night, including but not limited to falls, contact with other participants, the effects of the weather, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my form to participate in Kids' Night, I, for myself and anyone entitled to act on my behalf, waive and release the Northville Park Association and its officers and agents, all sponsors, their representatives and successors from all claims or liabilities.

I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature of Legal Guardian _____ Date: _____

Print name of Guardian: _____

Cell phone (for emergency contact that evening): _____

Person picking up: _____

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