LOWER MAKEFIELD TOWNSHIP PARKS AND RECREATION PARTICIPANT'S WAIVER AND RELEASE Offsite Trips/Bus Trips – Camp LMT 2024

Tween Adventures Camp has arranged a series of trips throughout the summer, which includes weekly offsite trips, and has occasional transportation on a bus to the following locations. Please check the following boxes for all trips your child will be attending and sign the below agreement. Please sign this form if you would like your child to participate. The form is due by <u>June 14th</u> and must be sent back to the LMT Community Center or via email to rvandegrift@lmt.org.

\checkmark	DATE	TRIP NAME	TRIP LOCATION
	6/26	Elmwood Park Zoo	1661 Harding Blvd. Norristown, PA 19401
	7/3	Funzilla	500 Lincoln Highway Fairless Hills, PA 19030
	7/10	Sesame Place	100 Sesame Rd. Langhorne, PA 19047
	7/17	Franklin Institute	222 N. 20th St. Philadelphia, PA 19103
	7/24	Trenton Thunder Game	1 Thunder Rd. Trenton, NJ 08611
	7/31	Camden Aquarium	1 Riverside Dr. Camden, NJ 08103
	8/7	Crayola Experience	30 Centre Sq. Easton, PA 18042
	8/14	Palace Roller Rink	11586 E. Roosevelt Blvd Philadelphia, PA 19116

RELEASE STATEMENT:

Whereas, I, the undersigned, do desire and intend to participate in all of said program, including the bus trip. Now, therefore, in consideration of the foregoing, and in consideration of the mutual relationship of others participating in said program, and of my participation therein, I do hereby, for myself, my heirs, executors, administrators, and assigns, forever remise, release, and discharge Lower Makefield Township, their successors and assigns, directors, officers, members, agents, and other representatives, and their heirs, executors, administrators, and assigns from any and all manner of action, causes of action, suits, debts, accounts, controversies, damages, claims and demands whatsoever, which I or my legal representative may have or may acquire against Lower Makefield Township or their directors, officers, members, agents, and other representatives, by reason of any loss resulting from personal injury or damage to baggage or any other personal property belonging to me; which may occur during or by reason of my participation in said program.

I agree that Lower Makefield Township shall have the right at their discretion to enforce established rules of conduct and/or terminate my participation for failure to maintain these standards, or for actions or conduct detrimental to or incompatible with the welfare, comfort, harmony, or interest of the group and its program as a whole.

I hereby grant Lower Makefield Township and any of their directors, officers, members, agents, and other representatives full authority to take whatever action they consider to be warranted regarding my health and safety, and I fully release all of them from any liability for such actions taken on my behalf.

I have hereunto subscribed this waiver and release on the	day of	, 2024.	
Printed Name of Participant			
Home Address			
I certify that I am the parent or legal guardian of the participal release; and that I join in the release without reservation, gran therein.		•	•
Signature of Parent/Legal Guardian		Date	
Home Address (if different than Participant's)			