



Miami County Park District

RELEASE OF LIABILITY FORM (MUST BE FILLED OUT FOR EVERY CHILD)

Miami County Parks Program ECO-SPLORES is designed to provide an opportunity to learn about our natural environment. Because a major part of the Eco-Splorers experience will involve interacting with all aspects of nature, including animals, we ask that attendees behave in a responsible and cooperative manner. We are confident that each participant will have an educational and fulfilling experience; however, those who find it difficult to be kind and respectful will be asked to sit out.

Parental Consent: Must be completed for all minors

Name of Minor Participant (Please Print): _____

Parent or Guardian of Minor (under age 18):

I _____, as Parent or Guardian, of the above stated minor participant represent to Miami County Parks that the facts herein concerning my child or ward are true. I hereby give my permission for my child or ward to participate in ECO-SPLORES. Further, in consideration granting such license, agree, individually and on behalf of my child or ward, to terms of the above Agreement and Release of Liability.

Signature: _____ Date: _____

Medical Form (please print)

Name:(child) _____ Sex: M/F Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone #: _____ Evening Phone #: _____

Parent/Legal guardian Phone (**during program**)#: _____

Doctor: _____ Phone #: _____

Person to contact in case guardian cannot be reached: _____

Phone Number: _____ Relationship: _____

Pertinent medical history (asthma, diabetes, allergies, etc.): _____

I, Parent or Guardian of _____ (minor) give Miami County Parks staff permission to administer first aid and/or transport said minor to nearest hospital or clinic for medical treatment.

Signature of Parent of Guardian Date