

AFTER-HOURS TEEN LOCK-IN August 12, 2023

Consent and Liability Waiver

Name of Participant _____

Home Address _____

I do hereby give my permission for my child to participate in the After-Hours Teen Lock-In at the Massanutten Regional Library (MRL) on **August 12, 2023 from 3:30 p.m. until 8:00 p.m. at Central Library in Harrisonburg**. I understand this is the only form I will need to sign to give such permission. I further agree that neither MRL, nor its officials, employees, agents, or representatives, whether volunteer or paid, shall be held responsible by me for any accident which may occur during the event. I understand that MRL and its representatives will take reasonable and responsible safety precautions.

In the event that a parent or legal guardian of a minor cannot be reached in a medical emergency, MRL is authorized to arrange for emergency treatment, the cost of which will be the sole responsibility of the parent or legal guardian.

I understand that no child will be allowed to stay at MRL's event without a **signed permission form**. A parent/guardian also **MUST** sign the child in for the event in the Youth Services Department at the Central branch of MRL, and sign the child out at the **rear entrance** (next to the parking lot) on **Federal Street after the event ends at 8pm**. If my child has permission to drive or walk to the event and sign him/herself in and out at the appointed times, then I will indicate my consent for such by initialing the appropriate line below.

Date: _____ Signature _____

Parent(s) or guardian

If your child is both old enough and allowed to drive themselves to and from the event please check here. _____

If your child is allowed to walk home from the event on their own please check here. _____



MEDICAL INFORMATION

Emergency Contact _____ Relationship to Child _____

Home Phone _____ Work Phone _____ Cell Phone _____

Any allergies to medicines, foods, etc. _____

Any history of illness or medical conditions _____

Any medication currently being taken _____



MEDIA CONSENT

_____ YES, I give my consent to MRL to use interviews, photographs, or video of my minor child for the purposes of education, communication, and promotion of the library.

_____ NO, I do not give my consent to MRL to use interviews, photographs, or video of my minor child for the purposes of education, communication, and promotion of the library.