

Release of Liability

1. I, the custodial parent/legal guardian of _____, give permission for my Child to participate in the Houston After Prom to be held at the Sidney Shelby County YMCA and release from all liability, indemnify, and hold harmless the **Houston After Prom Committee and all of its volunteers** from any and all liability, claims, judgments, damages, costs and expenses, including attorneys' fees, arising out of any injury, illness, infectious and/or communicable disease (such as MRSA, influenza, or COVID-19), or death, (including any injury, illness, infectious and/or communicable disease, or death caused by the negligence of the Houston After Prom Committee and its volunteers) incurred by my Child while participating in this activity, or while using the facilities and equipment of the Sidney-Shelby County YMCA. I further agree not to bring or prosecute or allow to be brought or prosecuted (including, but not limited to, prosecution through subrogation) in my name, or on behalf of my Child, any claims, lawsuits, or actions against the Houston After Prom Committee or its volunteers.
2. I understand that my Child's participation in the after Prom is purely voluntary and is a privilege and not a right, and that my Child, and I on behalf of my Child, agree to my Child's participation in After Prom, in spite of the risks of injury, illness, infectious and/or communicable disease (such as MRSA, influenza, or COVID-19), and death. I agree that if my Child has underlying health concerns which may place him/her at greater risk of contracting COVID-19 or that would possibly increase the severity of illness if COVID-19 is contracted, then my Child and I will consult with a health care professional before participating in After Prom.
3. I agree to instruct my Child to cooperate with the chaperones who are in charge of After Prom.
4. I authorize the Houston After Prom Committee and those who are acting as leaders of the activity to seek medical treatment for my Child in the event of any injury, illness, or medical emergency during the activity. I understand that the volunteers of the Houston After Prom Committee will make a reasonable attempt to contact me as soon as possible in the event of a medical emergency involving my Child.
5. I understand that After Prom starts at **11:30pm** and my Child must be checked in by **12:00am** and is expected to stay until **2:00am**.
6. This Permission, Release, and Authorization is intended to be as broad and inclusive as permitted by the law of the State of Ohio, and if any portion thereof is declared invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This Permission, Release, and Authorization shall be construed in accordance with the laws of the State of Ohio, except for the choice of law provisions thereof.

Location: Sidney-Shelby County YMCA 300 E. Parkwood Sidney, Ohio 45365

Activity: After Prom

Cost: \$10 presale, \$12 at door

Start Date/Time: April 2, 2022 @11:30PM

End Date/Time: April 3, 2022 @2:00AM

Activities Involved: Basketball, Volleyball, Racquetball, Agility Course, Karaoke, Board games, Corn hole

Signature of Custodial Parent/Legal Guardian: _____

Print Name: _____ **Date:** _____

Home Address: _____

Legal guardian Cell Phone #: _____ **Other #:** _____

Additional Emergency Contact Name and Cell #:
