TOWN OF WAPPINGER EASTER EGG HUNT PARENT/GUARDIAN CONSENT FORM - please read and initial

| I hereby give my permission to allow my son/daughter: (name) to participate | e in the Easter |
|--|---|
| Egg Hunt sponsored by the Town of Wappinger Recreation Department. | (initial) |
| - I acknowledge the risk of illness and injury inherent in participating in any recreativities during the Town sponsored Easter Egg Hunt. I hereby allow my child to said Easter Egg Hunt upon the express agreement and understanding that I, as produced as a property of the Easter Egg Hunt upon the express agreement and understanding that I, as produced as a produced for myself, and / or my executors and administrators, any claims for damages I may have against the Town Understanding that I, as produced as a produced for my child in the Town of Wappinger Recreation Department, its agents, employed designees acting on behalf of the Town of Wappinger, for any and all injuries surchild in the regular and ordinary course of my child's participation in such programment. | o participate in parent and / or heirs, who of oyees or fered by my |
| - I understand that the Town of Wappinger does not provide accidental medical insurance and I agree to provide my own medical insurance coverage or pay for the event of injury resulting from participation in such activities. | such costs in |
| - I hereby give permission to the Town of Wappinger Recreation Department or employees, or duly designated agent(s) to administer emergency medical care t absence in the event of injury. | _ |
| Parent/ Guardian name: | |
| Parent/Guardian signature: Address: | Date: |
| Emergency Phone Number: | |
| Check appropriate response: I do □ do not □ give my permission to allow any photographs taken of my charticipation in said program to be used in informational literature about the To Wappinger Recreation Department. | |
| Parent/Guardian signature: | Date: |