## **Minor Liability Waiver**

You are required to read the following information and sign it before allowing your child to participate in this activity or program.			
I,			
		I have read and understand this release, indemnif affirm that I voluntarily signed it. I further certify th condition, and has no medical or physical conditio this activity or program.	nat my child is in good physical
		Parent or Legal Guardian	Date
Address			
E-mail address	Telephone #		
Child/Minor's Name, Age			
Please check one: Teen, age 12-17 Child, under age 12 – It is the Library Policy that children under the age of 12	an adult accompany and supervise		