



ACTIVITY CONNECTION-WEB CONNECTION CONSENT FORM AND WAIVER OF LIABILITY

Child's Name: _____

I, [print name] _____ acknowledge that I as the parent/legal guardian of the child set forth to participate hereby agree to this consent form and waiver of liability on behalf of myself, my child, my personal representatives, heirs and assigns as a precondition to my/my child's participation in the online recreation event ("Event") at Children's Specialized Hospital ("CSH").

1. I confirm and acknowledge my child does not have any medical conditions restricting or posing increased risk for participating in the Event. I understand that my/my child's participation in the Event, which involves physical and social activities, involves inherent risks including infection, injury, property damage or death. I fully understand and accept the risks and dangers associated with the Event. I confirm that a responsible adult over age 18 will provide continuous supervision and support to my child throughout the Event should they require physical support or medical intervention.

2. I hereby waive any and all claims that I may have against CSH, its employees, agents, officers, directors, and parent and subsidiary entities, and release them from all liability due to infection, injury, death, property damage, or any other loss sustained by me or my child, as a result of participation in the Event, due to any cause whatsoever including, without limitation, negligence on the part of CSH. I appreciate that this consent form and waiver of liability applies whether CSH is at fault or not and it limits the liability of CSH's employees, agents, officers, directors, and parent and subsidiary entities to the same extent as it limits the liability of CSH.

3. I have read, understand, and fully agree to the terms of this consent form and waiver of liability. I understand and confirm that by signing this consent form and waiver of liability, my child and I have given up future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress. I have had the opportunity to ask any questions I may have had regarding this consent form and waiver of liability and those questions, if any, have been answered to my satisfaction.

Signature of Parent/Guardian: _____

Date: _____