



CITY OF PROVIDENCE

Department of Parks
Providence Park Activities -WAIVER FORM

The undersigned, being the adult participant (18 and over) or parent/legal guardian of the undersigned minor participant, hereby acknowledges that said participant seeks to participate in a fitness class or other event sponsored by the Providence Department of Parks. The undersigned specifically asserts that said participant will comply with the rules and regulations of the Providence Department of Parks, that the participant is aware that participation may require some physical fitness; that the athlete/participant possesses such fitness.

Therefore, the undersigned, in consideration of participation in a Providence Department of Parks program, herein grants to the Providence Department of Parks, its officers, agents, volunteers, and employees, a waiver of liability with regard to participation in any class or other event sponsored by the Providence Department of Parks. The undersigned specifically acknowledges that a risk of injury or death exists and that the Department of Parks assumes no liability for any injury or loss resulting from participation in any program, class or other event sponsored by the Department of Parks.

This form must be completed by all participants intending to participate in any class or other event sponsored by the Providence Department of Parks. All minor participants must sign and have a parent or legal guardian also sign.

NAME _____ BIRTHDATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

ATHLETE/PARTICIPANT'S SIGNATURE _____

LEGAL GUARDIAN'S SIGNATURE _____

TELEPHONE _____ DATE _____

LOCATION _____ ACTIVITY _____

DEPARTMENT OF PARKS + RECREATION