

## **Liability, 911 & Photo Release**

In consideration of the permission granted to me/my child by Lynchburg Parks & Recreation Department, I hereby release and save harmless the City of Lynchburg, its officers and employees from all actions, causes of action, damages and claims, or demands which I, my heirs, executors, administrators, or assigns may have against the City of Lynchburg, and/or other described parties for all personal injuries known or unknown incurred by participation in this/these activity(s). In the event of a medical emergency, I authorize representatives of Lynchburg Parks & Recreation to contact EMS at 911, if I or my child is incapacitated. In the event I or my child requires medical treatment, I agree to be responsible for the cost of such treatment. I am aware and agree that my child or I may be filmed or photographed and/or interviewed by news media, such as WSET and the News and Advance, as they are often invited to cover programs to help raise awareness of and promote Parks and Recreation activities. I also agree to allow the Lynchburg Parks & Recreation Department to use these photographs in any of its publications. I, the undersigned, have read this release and understand all its terms.

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**Signature of participant, parent, or legal guardian (REQUIRED)**

