EMERGENCY CONTACT CARD



Please complete this form and turn in on the first day of camp. AQUARIUM
OF THE PACIFIC.

Anne-profit Institution

We regret that participation cannot be allowed unless we have this completed form on file.

Child's Name:		Date:	
Parent or Guardian Names:	Work#		Cell #
Additional Emergency Contact			
Additional Emergency Contact Who may pick up your child?			Phone #
Allergies:			
Are there any medical conditions of waiver on the first day of camp to leave			are of? (You MUST sign a medication release)
Are there any special concerns or a camp experience?	ccommodations that	our teaching s	taff should be aware of to improve your child's
	DAY CAMP	CODE of CON	IDUCT
• •	elines for behavior w	ith your child.	acific day camp. Please take some time to read We ask that both you and your child sign the
 I will keep my hands to myself (I will respect and listen to camp I will respect other campers (no I will follow directions and stay I will use appropriate language 	educators at all time name calling or teas with camp educators	es. ling). s at all times, I v	
•			hese guidelines and I understand that if I cannot n feeding animals behind-the-scenes.
Child's Signature			
	•		e discussed these guidelines with my child. I e privileges and I will be notified if guidelines are

Parent/Guardian's Signature_____



AQUARIUM OF THE PACIFIC'S DAY CAMP

Waiver, Release and Indemnity Agreement

Please complete this waiver and turn in on the first day of camp.

We regret that participation cannot be allowed unless we have this completed form on file.

We regret that participation cannot be allowed unless we have this completed form on file. Waiver, Release, Assumption of Risk and Indemnity Agreement

Waiver: For and in consideration of permitting (child's name) to enroll and participate in activities and class instruction of the Aquarium of the Pacific, beginning (date including year) , hereinafter called "The Activity", I, for myself, my heirs, personal representatives, or assigns, do hereby release, discharge, waive and covenant not to sue THE AQUARIUM OF THE PACIFIC, its officers, employees and agents from liability from any and all claims including the negligence of The Aquarium of the Pacific, its officers, employees, and agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

Assumption of Risks: I understand and acknowledge that participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises and sprains 2) major injuries such as eye injury and loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death. I have read the previous paragraphs, and I know, understand and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation in The Activity is voluntary, and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I, also agree to INDEMNIFY AND HOLD The Aquarium of the Pacific HARMLESS from any claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Photographic Release: I grant the Aquarium of the Pacific and those acting under its permission and on its authority, the right and permission to copyright, use, publish, display, produce, duplicate, sell, and distribute photographic, video or sound recording reproductions, portraits or pictures of me/my child and physical likeness, which may be included in whole, in part or in composite, for any art, advertising, commerce, business, trade, or any other lawful purpose. I understand that this use applies to segments of the above for public announcements, informational film clips, or other uses necessary to provide information or advertisement for the Aquarium of the Pacific.

COVID-19: By attending camp at the Aquarium of the Pacific, you agree to hold harmless the Aquarium of the Pacific, its staff, Board of Directors, and the City of Long Beach from any resulting injuries, illnesses, or other inherent risks to you and your family, including potential exposure to COVID-19. If your child, or anyone in your household, is experiencing COVID-19 symptoms such as sore throat, cough, shortness of breath, fever, or recent loss of taste or smell, or has been exposed to COVID-19, they may not attend camp.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Signature of Parent/Guardian	Date:
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