

**THE NEW SCHOOL SUMMER CAMP**

2514 New School Place  
Fayetteville, AR 72703

**SUMMER CAMP WAIVER 2019**

I, \_\_\_\_\_, hereby affirm and agree that I am the parent or legal guardian of \_\_\_\_\_, a minor ("Minor"); that I am legally competent to sign this agreement and release; that I have fully informed myself of this agreement by reading it before signing; and that I have fully informed myself of the details and risks of Summer Camp prior to signing this release.

I agree, individually and on behalf of Minor, to release and to hold harmless The New School and its employees from liability of any kind, for Minor's injury, death, or damage to or loss of Minor's personal property, resulting directly or indirectly from his/her participation in Summer Camp or from The New School's negligence. I personally assume all risks and liabilities in connection with the Minor's participation in Summer Camp and agree to indemnify The New School from any liability assessed against The New School as a direct or indirect result of minor's participation in Summer Camp. This release includes all risks and liabilities connected with Summer Camp, whether foreseen or unforeseen.

In the event that Minor is injured during Summer Camp, and I am unable to provide consent to his or her medical treatment, I authorize The New School to consent on my behalf to the performance of any and all medical treatment judged necessary by The New School, until I am able to provide consent or until someone legally able to speak on Minor's behalf is made available. I agree, individually and on behalf of Minor, to release, indemnify, and hold The New School harmless from any liability, which may be assessed against The New School as a direct or indirect result of said medical treatment. I agree to pay or arrange for payment for all costs associated with said medical treatment.

Name

\_\_\_\_\_  
Relationship to Student

\_\_\_\_\_  
Date