



**Charles R. Parsons Administrative Offices**

524 Broad Street, Wadsworth Ohio 44281

Phone: 330-336-3571, Fax: 330-335-1313

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Summer, 2018

I understand that participation in the Wadsworth City School District Board of Education summer STEM Camp is voluntary. While the activities planned for STEM Camp are not necessarily physically strenuous, I understand that injuries can occur and I specifically agree that my child's participation in the camp assumes these risks. I recognize that, while campers will be supervised, injuries may occur despite supervision and safety precautions and neither the Camp nor the Wadsworth City School District Board of Education can guarantee that my child will not be injured. I agree that I have instructed my child to obey all rules, regulations, and instructions of the camp. In consideration of allowing my child to participate in the summer STEM Camp, I hereby voluntarily release, waive, hold harmless, and agree not to sue the camp staff, the Wadsworth City School District Board of Education, and its officers, employees, agents, students, and staff from any and all liability, claims, actions, demands, expenses, attorney fees, breach of contract actions, and any other causes of action whatsoever that I may now have or may acquire in the future, arising out of or in any way related to any loss, damage, or injury sustained by me or my child while participating in the camp.

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Student Name

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Date

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Parent/Guardian Name

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Parent/Guardian Signature