



ANDOVER RECREATION EMERGENCY INFORMATION SHEET

Phone: 978-623-8340

Fax: 978-623-8394

rec@andoverma.us

Participant Name M F Date of Birth / /

Street Address Home Phone

Town State Zip Code

Best Email Cell Phone

*Parent/Guardian Name Cell Phone

*Parent/Guardian Name Cell Phone

Medical & Behavioral Information

Please state any medical conditions, behavioral conditions, medications, or allergies of which the staff should be aware. Attach additional sheets as needed.

Emergency Information

Doctor's Name & Phone

Insurance Provider & Policy Number

Emergency Contact

Please list an additional contact in the event that a parent/guardian cannot be reached.

Name, Relationship, Phone Number

PARENTAL/GUARDIAN CONSENT & RELEASE FORM (Minor)

I, _____, the undersigned _____ (legal relationship) of my child, a minor, do hereby consent to my child's participation in voluntary programs of the Town of Andover's Recreation Division.

On behalf of myself and my child, and our respective heirs, executors and administrators I also agree to forever release the Town of Andover, and all of its successors, employees, agents, officials, board members, volunteers and also any and all individuals and organizations assisting or participating in programs of the Recreation Division (the Releasees) from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in the Town of Andover's voluntary programs in the Recreation Division, or from the negligence, including the gross negligence, of the Releasees.

On behalf of myself and my child, I also promise to indemnify, defend and hold harmless the Releasees against any and all legal claims and proceedings of any description including reasonable attorneys' fees, that may have been asserted in the past, or may be asserted in the future, arising directly or indirectly from my child's participation in the Town of Andover's voluntary programs in its Recreation Division, or from the negligence, including the gross negligence, of the Releasees.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in these programs with full knowledge that the Releasees will not be liable to anyone for personal injuries or property damage which my child or I may suffer in these programs.

If I cannot be reached in a medical emergency, I consent to my child's treatment by a medical doctor and agree to pay all costs associated with said treatment, including transportation to a medical facility.

CONSENT & RELEASE FORM INDIVIDUAL (Adult - Age 18 and Over)

I, _____, do hereby forever release, acquit, discharge and covenant to hold harmless the Town of Andover and its successors, employees, agents, officials, board members, volunteers and also any and all individuals and organizations assisting or participating in program of the Releasees from any and all actions, causes of action, and claims, demands, damages, costs, on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may have now or hereafter have from my participation in the Town of Andover Recreation Division programs, or from the negligence, including the gross negligence, of the Releasees.

I also promise to indemnify, defend and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including reasonable attorneys' fees arising from my participation in the voluntary activities or recreation programs referenced above or from the negligence, including the gross negligence, of the Releasees. I understand that these programs involve physical activity and hereby state that I am in proper physical condition for participation in such programs.

I further affirm that I have read the Consent and Release Form and that I understood the contents of this Form. I understand that my participation is voluntary and that I am free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to participate in the program described herein and full knowledge that the Releasees will not be liable to anyone for personal injuries or property damage that I or any other party may suffer in these programs.

PHOTO, VIDEO & MARKETING RELEASE

As a participant, or parent/guardian of a participant, in an Andover Recreation program, event, or trip and when using one of its public parks or facilities, you/your child(ren) may be photographed or videotaped by Andover Recreation (Rec) or its assigns and transferees. By registering in a program you are granting permission to Andover Recreation to copyright, use and publish the same in print and/or electronically with or without you/your child(rens) name and for any lawful purpose, including for example, publicity, illustration, advertising, program guide, brochures, newsletter, email, digital media boards, website, social media, news releases or other promotional materials. Also by providing your email address during registration, you give permission to Andover Recreation to send emails to that address regarding events and programs. If you decide not to receive email, you can unsubscribe at any time using the link in the email.

I, the undersigned, understand that by participating in any Andover Recreation program, event, or trip and when using one of its public parks or facilities, I am agreeing to all Andover Recreation policies for myself and my minor children. Full policy information is available at AndoverRec.com or in the Andover Recreation office.

Print Name:

Signature:

Date: