



Release Form

Photo Release Form (Optional)

I give my permission for the Webb County Educational Summer Camp staff to use photographs of my child _____ for purposes of publicity or publications, both internally and externally through various media sources, including but not limited to, newspaper, magazine, internet and television.

Liability Release Form (required)

Release is made as of (date) _____ by the undersigned. I understand and appreciate that participation in the Webb County Educational Summer Camp involves potential, although highly unlikely, loss or damage to personal property and bodily injury.

In consideration of my being permitted, or my child being permitted, to participate in the scheduled activity, I hereby release and hold harmless Webb County, Educational Summer Camp as sponsor, its commissioners, officers, trustees, employees, affiliates and agents (the "Released Parties") from any and all actions, damages, claims or demands which I or my child (ren), our heirs, executors, administrators or assigns may have against the Released Parties for all bodily injuries, known misconduct or grossly negligent act, of any of the Released Parties.

I, the undersigned, have read this release and understand its terms. I realize this is a partial release of liability, and limits, to some extent, my rights to sue in the event of any loss or injury, and I execute it voluntarily and with the full knowledge of its significance. I agree to follow, or cause to be followed, all directions of the activity's leaders.

I understand that cell phones and cash are not allowed at camp, and my child (ren) will not bring a phone or money to camp. Phones and money will be confiscated and returned to the parents. A second offense may warrant permanent expulsion from camp.

I, the undersigned, am the parent or legal guardian of the following named minor _____ and enter the foregoing release on the minor's behalf.

Signature of Parent/Guardian: _____

Printed Name: _____ **Date:** ____ / ____ / ____