

## City of Santa Clarita Library Activity Participation Form

Activity/series: May the 4th Celebration

Season/date range: Thursday, May 4, 2023

This form is required to be filled out and signed by a parent/legal guardian for any minor participant in a City of Santa Clarita Public Library onsite activity/series of activities named above. Schedules for seasonal activity series are available in City library branches. Seasonal activity series include, but are not limited to, themed story times, movie showings, and arts/crafts activities. By signing and submitting this form, you are providing permission for your child to participate in all programs offered within the season named above. Hardcopy signed form must be submitted to Library staff, scans or electronic signatures are not accepted.

Parent First and Last Name:		
Home Phone Number:	Cell Phone Number:	
PARTICIPANT INFORMATION (list	multiple participants if needed):	
Participant First and Last Name		Birthdate
I have the authority and voluntarily agree to Clarita programs, or any extension thereof. I elected officials, agents, and employees from accidental death, as well as from claims for parent/guardian, I hereby consent to treatmen a result of accident or injury. I further agree signing below, I acknowledge the contagious may be exposed to or infected by COVID-19 infections. I hereby give permission to the C for promotional purposes. I understand the pof any kind. I hereby give permission to the related materials created by my child's participublications. I understand that I and/or my contact the publications. I understand that I and/or my contact the publications. I understand that I and/or my contact the publications. I understand that I and/or my contact the publications.	hereby waive, release, and hold harmle any liability for damages or claims for property damage which may arise in connect of my minor child for any and all med to pay any and all costs incurred as a resonature of COVID-19 and voluntarily a by attending this program. I understand the clay of Santa Clarita to use my, or my chabotograph belongs to the City of Santa Clarita to display and/or using this program for any purpose	damages or personal injury, including nection with such activities. As lical procedures deemed necessary as sult of said treatment. In addition, by ssume the risk that I or my child(ren) I the risks associated with COVID-19 ildren's photographs as they see fit Clarita and I will not receive payments of photos or samples of artwork or including social media and City
Parant Signatura	Data	Signed: