

**PARENTAL CONSENT and RELEASE FORM LIABILITY
FOR CITY OF LYNN PARKS AND RECREATION
SKY ZONE**

I/We, the undersigned parent(s) or guardian(s) of _____,
A minor, do hereby consent to his/her participation in the City of Lynn
Parks and Recreation trip to Sky Zone on Thursday, February 23, 2012.

I/We forever RELEASE, acquit, discharge and covenant to hold harmless
the City of Lynn, a municipal corporation of the Commonwealth of
Massachusetts, and its officers, employees, servants, and agents from
any and all actions, causes of action, claims, demands, costs, loss of
services, expenses and compensation on account of, or arising out of,
directly or indirectly, any personal injuries or property damage which
I/We may hereafter have as the parent(s) or guardian(s) of said minor,
and also all claims or rights of actions for damages which said minor
may acquire, either before or after he/she has reached his/her
majority, resulting from his/her participation in an indoor trampoline
at Sky Zone.

Signature of Parent(s) or Guardian(s)	Date	Relationship
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THIS FORM MAY NOT BE ALTERED

Child's Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Parent/Guardian Cell Phone: _____

IN CASE OF EMERGENCY PLEASE CONTACT:

	NAME	PHONE #	RELATIONSHIP
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

OFFICE USE ONLY:

AMOUNT PAID: _____ **DATE:** _____ **CHECK #:** _____

BALANCE: _____ **RECEIVED BY:** _____