**Parental Consent, Waiver, and Release for Summertime Kick It Dance Camp**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby consent to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s (“my child/ward”) participation in Lyndon Institute’s (hereinafter “L.I.” or the “School”) Summertime Kick It Dance Camp (the “Camp”), which is a one-week intensive dance camp for grades 7-12 to be held at the School’s Town House from July 22 through 26, 2019.

I acknowledge and agree that as a necessary result of my child/ward’s participation in the Camp, he/she/they will be exposed to all the attendant risks thereof, including, but not limited to, risks that may result from vigorous physical movement, physical contact, and exertion, including but not limited to strains, sprains, cuts, abrasions, and broken limbs.

I also acknowledge and agree that, as a necessary result of my child/ward being on the Lyndon Institute campus in connection with the Camp, my child/ward will be exposed to all of the risks attendant to being present on the campus of an independent secondary school that has day students, boarding students, adult staff members, and other adults living in residential facilities on campus. If my child/ward will be staying overnight on the L.I. campus as part of his/her participation, then I acknowledge and agree further that as a necessary result of my child/ward being on the Lyndon Institute campus in connection with the Camp, my child/ward will be exposed to all of the risks attendant to residing on the campus of an independent secondary school that has day students, boarding students, adult staff members, and other adults living in residential facilities on campus.

Notwithstanding these risks, I hereby give my permission for my child/ward to participate in the Camp.

On behalf of myself and my child/ward, and in consideration for Lyndon Institute’s allowing my child/ward to participate in the Camp, I hereby freely and knowingly waive any and all claims that I or my child/ward may have against L.I. and its trustees, employees, agents, chaperones, and volunteers (hereinafter, collectively “L.I.”) and freely and voluntarily release L.I. from any and all claims, damages, rights of action—present and future (whether known or unknown)—resulting from or arising out of my child’s/ward’s participation in the Camp.

I further acknowledge and agree that my child/ward’s participation in the Camp is conditioned on his/her/their compliance with the rules established by the School for the Camp, including, but not limited to, compliance with the direction from the staff members of the School and the fully-vetted guest artists.

I have carefully read and completed this Parental Consent, Waiver, and Release, and I sign it of my own free will.

Permission to Treat: In case of any injury to my child/ward during the Camp, I hereby consent to have my above-named child/ward examined and, if required, treated by a physician or hospital. I understand that the School will make every effort to contact me prior to taking the child to a physician or hospital. In the event I cannot be so notified, the School or its representative has my permission to take appropriate steps to ensure the safety and well-being of my child/ward.

I, the parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give L.I. and its authorized personnel permission to sign for treatment in case of accident or injury.

Printed name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_