



JACKSON COUNTY Parks + Rec

22807 Woods Chapel Road
Blue Springs, Missouri 64015
MakeYourDayHere.com

Michele Newman, Director
(816) 503-4800
Fax: (816) 795-1234

RELEASE FORM

I request that _____ (**Applicant's Name**) be enrolled in Jackson County Parks + Rec's Special Population Services programs.

I authorize Jackson County Parks + Rec Special Population Services staff to make emergency medical decisions on my behalf (or on behalf of the applicant) if immediate medical care is required and I cannot be reached.

In the event of an accident, injury, or loss, I agree to release and hold harmless **Jackson County, Missouri**, including its elected and appointed officials, employees, instructors, volunteers, and any other individuals associated with the Special Population Services programs, from any liability related to participation in these programs.

I give permission for the applicant to travel and participate in program activities that may take place outside of Jackson County Parks + Rec Special Population Services locations, including scheduled field trips and sporting events.

I also grant permission for Jackson County Parks + Rec Special Population Services to take photographs or videos of me or the applicant while participating in program activities. These images and names may be used for news releases, educational materials, publicity, or other public relations purposes.

Signature of Parent, Legal Guardian or
Applicant (if over 18)

Date

Print Name

To opt out of photography, video and/or audio, initial here: _____