

# Late Night Nerf Battle

## for kids in grades 3–5

### Permission & Release Form

**\*Both pre-registration AND a signed permission form are required to attend\***

*Register online at [www.sclld.org](http://www.sclld.org) or by calling or visiting the library.*

I am the Father / Mother / Guardian of \_\_\_\_\_

My child is currently in grade (select one)  3  4  5 and has my permission to attend:

- Late Night Nerf Battle at Cheney Library on Thursday, April 4, 7–9pm**
- Late Night Nerf Battle at Moran Prairie Library on Friday, April 5, 7–9pm**

I understand that my child will participate in the various types of activities that may include:

**Playing Nerf tag • Shooting Nerf darts • Running • Other vigorous physical activities**

Adult picking up my child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Please provide any information about your child that staff might find helpful (such as allergies, medications, medical conditions, special needs, etc.): \_\_\_\_\_

During this evening activity, I can be reached at:  
Name \_\_\_\_\_  
Phone \_\_\_\_\_

If I cannot be reached in the event of an emergency,  
the following person is authorized to act on my behalf:  
Name \_\_\_\_\_  
Phone \_\_\_\_\_

#### RELEASE AND INDEMNIFICATION

I hereby agree to indemnify and hold harmless and blameless the Spokane County Library District, its officers, employees or agents from any and all liability from damages, loss or injuries, either to person or property, which the said minor may sustain while engaged in the Late Night at the Library at a Spokane County Library District branch. I further certify that I have legal custody by reason of the fact that I am the parent or the legal guardian by court order. I further allege that the said minor is physically able to participate in the activity set forth herein. I further agree to reimburse or make good any loss or damage or costs that the Spokane County Library District may have to pay if any litigation arises on account of any claim made by said minor, or anyone in said minor's behalf, resulting directly or indirectly from said minor's participation in the Late Night at the Library. I further agree in case of injury or illness or other actions requiring parental permission, the Spokane County Library District staff shall have the authority to act for us, in case we cannot be reached. I further understand that in case of injury, serious illness, or in extreme cases of disciplinary action, the library staff will, if need be, send home my son/daughter by the first available transportation at my own expense.

\_\_\_\_\_  
*Parent / Guardian Signature*

\_\_\_\_\_  
*Date*