

School/Agency Name: _

Outdoor Classroom - Tulsa Inc. 4218 Choctaw Drive Tulsa, OK 74115 918-671-1871 outdoorclassroom.org

PARENTAL/GUARDIAN CHILD AND/OR ADULT PARTICIPANT RELEASE

Facility Areas: Tulsa City Park – Mohawk Park

LIABILITY RELEASE:	
In general, it is Outdoor Classroom – Tulsa ("Outdoor Classrohave control of and responsibility for their (and their children Outdoor Classroom will involve hiking of low and moderate my children may come in contact with water, plants, trees, and other insects, animals, plants and materials expected to Classroom is a sponsored event by the above-mentioned Southe Agency's staff are responsible for the children, including entire period. The Outdoor Classroom - Tulsa Staff and Volume	en's) own personal safety. Activities involved in the difficulty, for short periods. In addition, myself or insects, bees, squirrels, geese, snakes, poison ivy, to be encountered outdoors. Furthermore, Outdoor chool/Agency ("Agency"). Myself, as a parent, and my children, participating in this event during the
As my children's Parent/Guardian or myself as a school auth authority, that the Outdoor Classroom involves physical acti property damage. In consideration of the opportunity to unconditionally release and agree to hold harmless Outcontractors, employees, officers, directors, and members f claims, or judgments of thereto, for any injury, damage, il sustain during or as a result of their participation in the connection with physical activities. I acknowledge that this permitting me and/or my child/children to participate, and assigns, and personal representatives and my children and t	vities which gives rise to the risk of bodily injury or participate in this program, I hereby fully and door Classroom - Tulsa, their respective agents, rom any and all liability, demands, suits, actions, lness which myself and/or my child/children may event. I recognize the risks of injury inherent in release is being relied on by the above persons in that this release shall be binding on me, my heirs,
In reference to COVID-19, I am aware of the potential spread potential death. Therefore, I will, to the best of my ability, by health department directives, practice good hygiene (han when required, etc.) and follow other health recommenda promise to self-report the illness, contact Outdoor Classrooi self-quarantine.	practice proper social distancing as recommended dwashing, use of hand sanitizer, wearing of a mask tions. Should I or my child/children become ill, I
PHOTO RELEASE [Please Check Box if you want to Opt Out]: I grant to Outdoor Classroom - Tulsa the right to take p connection with the above-identified event. I authorize Out to copyright, use and publish the same in print and/or elect may use photographs with or without notification and for purposes as publicity, illustration, advertising, and Web contracts.	hotographs of my child's or my participation in door Classroom - Tulsa, its assigns and transferees tronically. I agree that Outdoor Classroom - Tulsa r any lawful purpose, including for example such
I have read and acknowledge the above, and I am an author	ized signatory:
NAME (Printed)	ATE
SIGNATURE CH	HILD/CHILDREN'S NAME AND TPS ID#