



Nahant Marsh Education Center
 4220 Wapello Ave.
 Davenport, IA 52802
 Phone: 563-336-3370
 Email: nahantmarsh@eicc.edu
 Website: www.nahantmarsh.org

2019-2020 Homeschool Registration Form

Please mail this form to Nahant or bring the completed form with you when dropping off your child.

Child's Name _____ Age _____ Grade _____
 Child's Name _____ Age _____ Grade _____
 Child's Name _____ Age _____ Grade _____
 Parent/Guardian Names _____
 Address _____ City _____ State _____ Zip _____
 Phone Number _____ E-mail _____
 Best Way to Contact _____

What session(s) will your child be attending:

- | | | |
|--------------|-------------|----------|
| September 27 | December 20 | March 27 |
| October 25 | January 31 | April 24 |
| November 22 | February 28 | May 29 |

Important Medical Information

Medical Problems we should be aware of _____
 Medications _____
 Other important Information _____

Emergency Contact Information (if other than parent)

Name _____ Relationship to child _____
 Phone Number _____

Other Persons allowed to pick up your child(ren)

Name _____ Phone Number _____
 Name _____ Phone Number _____

Nahant Marsh Education Center Release of Liability Form

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING IN ANY ACTIVITY OR EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in the activity or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity or event in which I may participate and that it will govern my actions and responsibilities at said activity or event.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

(A) **I WAIVE, RELEASE, AND DISCHARGE** from any and all liability, including, but not limited to, liability arising from the negligence, or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Nahant Marsh Education Center and/or its directors, board, officers, employees, volunteers, representatives, and agents, the activity or event holders, activity or event sponsors, activity or event volunteers;

(B) **I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE** the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

I acknowledge that this activity or event may involve a test of a person's physical and mental limits and may carry with it the potential for serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of people including, but not limited to participants, volunteers, spectators, officials, event monitors, and/or producers of the event, and lack of hydration. The risks are not only inherent to the participants but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during activities or events.

I understand that at certain events and activities, I may be **photographed or videoed**. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns. The accident waiver and release of liability shall be constructed broadly to provide release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT IN ITS ENTIRETY, AND I FULLY UNDERSTAND THE CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Print Participant's Name

Age

Participant Signature (Guardian sign if under 18)

Date