



# Town of Saugus

Saugus Youth and Recreation Department  
Athletic League Program

## Consent and Release Form

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_, a minor, do hereby consent  
(print name parent/guardian) (print name of child)

to my child's participation in the voluntary athletic and/or recreation programs of the **Saugus Youth and Recreation Department & S.A.L.**, in the Town of Saugus. I also agree to forever release the Town of Saugus, all Saugus Public Buildings, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs of the Town of Saugus, **Youth and Recreation Program & S.A.L.** ("the Releases"), from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage or property loss resulting from my child's participation in the **Saugus Youth and Recreation Program** voluntary athletic and/or recreation programs.

I also promise, to indemnify, defend and hold harmless the Releases against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage or property loss resulting from my child's participation in the Town of Saugus **Youth and Recreation & S.A.L.**, a voluntary athletic and/or recreation program.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the Town of Saugus Youth and Recreation Athletic League Programs with full knowledge that the Releases will not be liable to anyone for personal injuries and property damage or property loss which my child, or I, may suffer in voluntary Saugus Youth and Recreation Athletic League Programs.

I also grant to Saugus Youth & Recreation, its representatives and employees the right to take photographs of myself and/or my child(ren) in connection with this program. I authorize Saugus Youth & Recreation, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Saugus Youth & Recreation may use such photographs with or without my name and for any lawful purpose.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian of \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Name & Number \_\_\_\_\_