

Bring A Friend To Sleepover
Medical Release and Waiver of Liability

I _____ (parent/guardian), certify that my child _____ is in good physical condition and can participate in the scheduled activities. I grant permission for the director of First Coast Center for the Arts Inc. to act for me according to their best judgment in any emergency requiring medical attention. The undersigned releases and discharges First Coast Center for the Arts Inc. and all it's employees exercising reasonable care within their scope of employment, from liability for any known and unknown, foreseen and unforeseen personal injuries.

Signature of Parent or Guardian

Who did you come with???

Visitors Phone Number

Visitors Email

Date

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