



JR CAMP GOLF WAIVER AT DRUIDS GLEN GOLF CLUB

Please print this form, complete it, and bring it on the first day of kids camp

A. I, the undersigned, understand that Parks Legacy Project LLC, Druids Glen Golf Club, first priority is the safety of my child. I understand that risks of injury may exist during the program, in activities of physical nature or on our property, for my child or the caregiver, to which PLP, LLC, Druids Glen Golf Club, is not responsible. I hereby release, waive, discharge and assume full responsibility of any risk of injury, for my child or caregiver, and agree not to hold PLP LLC, Druids Glen Golf Club, its owners, employees, instructors, and staff, liable in the case of injury as a result of my child's participation in their programs.

B. I, the undersigned, understand that PLP LLC, Druids Glen Golf Club, holds liability business insurance, but doesn't hold medical coverage for injuries happening in one of our programs. Therefore, parents or caregivers should review their health insurance policies.

C. I acknowledge and understand that my child's attendance will require him/her to physically interact with PLP, LLC, Druids Glen Golf Club, staff members and other students. As such, despite reasonable mitigation efforts on behalf of, PLP LLC, Druids Glen Golf Club, physical interaction with the public may pose some unavoidable risks to myself, my child, and my family due to the COVID-19 pandemic. With that, I further acknowledge and agree to the following:

1. I hereby release and forever discharge and hold harmless PLP LLC, Druids Glen Golf Club, and its agents from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my child's return to classes and/or participation in activities associated with PLP, LLC, Druids Glen Golf Club. I understand that this release discharges PLP, LLC, Druids Glen Golf Club, from any liability or claim that I may have against PLP, LLC, Druids Glen Golf Club, with respect to the COVID-19.

2. I further understand that my child's participation may expose him/her and others to unavoidable COVID-19 community spread. As such, I hereby expressly and specifically assume the risk of injury or other harm, and also expressly release PLP, LLC, Druids Glen Golf Club, from all liability for injury, illness, or other issue resulting from or in any way related to my child's return or participation.

3. I acknowledge and understand my child is not able to attend any session if they have any symptoms of fever, cough, shortness of breath, sore throat, or diarrhea.

D. The undersigned further agrees to indemnify PLP LLC, Druids Glen Golf Club, its employees, members, agents, representatives and other organizations affiliated with it and hold it harmless for any liability, loss, damage, cost, claim, judgment or settlement which may be brought or entered against it as a result of participation in its programs.

E. I, the undersigned, do hereby grant or deny permission to PLP LLC, Druids Glen Golf Club, to use the image of my child(ren) as marked by my selection below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the PLP LLC, Druids Glen Golf Club, Web site.

- Deny permission to use my child(ren) image at all.
- Grant permission to use my child(ren) image.

Known Allergies _____

Known Medical Conditions _____

BY EXECUTING BELOW, I ACKNOWLEDGE HAVING READ AND UNDERSTOOD ALL OF THE ABOVE-TERMS AND CONDITIONS.

Child(s) Printed name

Parent/Guardian Signature Date

Parent/Guardian Printed Name