

Printed Name

Portsmouth Free Public Library After-Hours Nerf War Permission, Waiver, and Release Form Friday May 16th 6-8pm

A parent or guardian must sign the permission form below. Participants will not be admitted without a signed form.

- The building will be locked at 6:00pm. Staff will only be manning the door until 6:10 to let students in. Teens must be dropped off by 6:00pm. Parents must pick up their child/children promptly at 8pm when the doors are unlocked and monitored by staff. If you need to leave before then, please make special arrangements with Colleen or Nicole when you arrive.
- There will be a zero tolerance policy in regards to bullying. We will discuss the rules at the start of
 the event, and anyone not following those rules will be asked to leave. Please ensure your child
 has an understanding of this before the event.
- All participants must wear attire suitable for physical activity. Flip-flops, sandals, or other inappropriate clothing will not be allowed. Eye protection is required.

I recognize that a risk of injury exists, including but not limited to of myself, my heirs and assignees, I, the legal parent or guardi	· · · · · ·
grant permission for my child to attend the After-Hours Nerf Wa	
indemnify, and hold harmless the Portsmouth Free Public Libra	
employees for any and all claims, demands, losses, costs, liab	•
damages, and expenses connected with my child's participation	on in the After-Hours Nerf War.
I acknowledge that I have read and fully understand the terms	and conditions of the foregoing
Permission, Waiver and Release Form and that as the legal pa	arent or guardian, agree and will
comply with the same.	
The Portsmouth Free Public Library has my permission to use	my or my child's image/video
publically to promote the library. I understand that the images/	video may be used with or without my
name in print or digital format, including but not limited to publi	cations, presentations, web sites, and
social media. I understand that no royalty, fee, or other compereason of any such use.	nsation shall be payable to me by
During the event, I may be reached at	(phone number).
I understand that if my child engages in any inappropriate beha	
him/her up immediately.	•
Guardian Signature	Date