## **FOREST LEARNING LAB PERMISSION FORM\***

Child's Name:		
I, giv (parent/guardian full name) (child's full na	ve permission for	to
(parent/guardian full name) (child's full na	ime)	
participate in the 21st Century Parks, Inc. For understand that the child named above multiple Parks, Inc., including all policies and proced Inherent risk is associated with all outdoor and fishing. All of these activities can be activities to release and hold harmless 21st Censickness, disease or death, (including loss of during this program.	ust follow all rules and regulations dures laid out in response to the Cractivities including but not limited diversely effected by trail condition ntury Parks, Inc., from any and all	s stated by 21st Century COVID-19 pandemic. d to hiking, biking, wading, ns and weather. I further claims of bodily injury,
Signature	Date	
Relationship to Child		
Emergency Contact # ( ) -		
In case of emergency, The Parklands Educa Interpretation, Curtis Carman will be on ha (502) 592-7618 during regular operating ho	and at The Parklands. Staff can be	•

\*This is a required document; child will not be admitted to program without this completed form