

Enchanted Garden Release Form

Class/Class Series/A	Activity: _	_ Enchanted	d Garden	SPBC_	
For ages:all Date(s): Thursday, July 20 from 6:30 pm					
[Please print] I, Firs		MI	Las	t	give permission to my child, to participate in
	First	MI	·	Last	to participate in
the above noted class, series of classes, or activity taking place in Howard County Library System's (HCLS) Enchanted Garden, located adjacent to the HCLS Miller Branch on the above noted date.					
I understand that:					
wildlife, plants, and Certain inherent co- conditions that can be exposed to the el	other natural orditions the ead to acciements, for and movin	ral features. nat pose <i>potentia</i> dents, injury, il res of nature, a g; garden tools	<i>al risks and a</i> llness, sunbur as well as sur	l <u>angers</u> are pr n, allergic rea roundings, tha	door teaching venue that includes water, esent in the Enchanted Garden—actions, etc., even death, as my child will at can cause same (for example: water—; sun; plant life; insects and wildlife;
I further understand	that:				
Garden.					Miller Branch and the Enchanted
My child will be directly exposed to existing weather conditions.My child must wear shoes at all times.					
•Miscellaneous garden tools and implements are present in the Enchanted Garden, and may be used by class participants.					
My child may be digging, with his/her hands, in dirt and/or mud.					
Food and beverages may be available to my child as part of this class, including produce.					
 HCLS staff will call 911 in the event of an emergency. A parent, guardian, or caregiver must attend this class with any child younger than eight (8) years old. 					
Release from Liab County, MD, their of	dity. I, my officers, em in this cla	successors and aployees, and ag ss, and from an	assigns, agregents, from al	e to save and Il cost, injury	hold harmless HCLS and Howard and damage incurred as a result of my o any person or property whatsoever,
Age of child:	Par	ent/Guardian s	ignature:		Date:
Email:					