



# YMCA of the Palouse

## 3 on 3 Youth Basketball League

FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

### RELEASE AGREEMENT

1. **Permissions: I give my permission for my child/ren to:**
  - a. use all play equipment and participate in 3 on 3 basketball program.
  - b. be given emergency treatment by qualified YMCA staff.
  - c. use hand sanitizer when hand washing facilities are unavailable.
  - d. be transported by ambulance to an emergency center for treatment.
2. In the event that I cannot be contacted, I further consent to the medical, surgical, hospital care, treatment, and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by the physician to safeguard my child's health.
3. I will be responsible for all fees accumulated as a result of my child's registration and participation in YMCA programs. I understand that all fees are payable in advance and that program participation will be denied if payments are past due. All past due accounts will be referred to collections.
4. I give permission for my child to be photographed for use in media and promotions of YMCA programs. If not giving permission, I will opt out via written request.
5. **To the best of my knowledge, my child is in good health and is NOT showing any symptoms of illness, including an elevated body temperature. If my child shows any symptoms of illness, including an elevated body temperature, the YMCA will contact me, or my approved emergency contacts if I am not available, requiring immediate pick up. In the event any child or staff is sent home due to illness, parents will be notified.**
6. **I understand that while the Y will do what they can to minimize risk of exposure to COVID-19, avoiding risk can not be guaranteed. Thus by registering my child/ren and having them attend the day camp program, as their parent/guardian, I the undersigned, assume all risk and liability.**
7. **I understand that staff and participants will be required to wear facemasks at all times, and health screening questions will be asked at check in each day.**
8. I understand that the YMCA has safety standards in its programs and that all activities will be properly supervised. The YMCA does not provide individual accident insurance; therefore, I will provide the necessary coverage in the event of an accident.
9. The YMCA cannot be held responsible for problems related to a child's failure to receive the required immunizations.
10. When leaving a child at the YMCA or program site, he/she must be signed in and make sure a program staff or volunteer is available to receive and supervise your child. The YMCA staff will not call to verify absences when a child is not signed in.
11. The YMCA will release children only to people authorized by the parent/guardian.
12. Y staff and volunteers are required by state law to report suspected child abuse. This will be handled confidentially through a staff person's supervisor and the program director.
13. If the person picking up a child appears to be under the influence of drugs or alcohol, for the child's safety, that person will be asked to allow someone else on the authorized list to pick up the child. If that person insists on taking the child, the YMCA will make a report to the police and Child Protective Services. Please do not put our employees and volunteers in a position where they have to make this judgment call.
14. Parents/Guardians may watch as spectators as long as the current phase for Covid-19 guidelines allows and those guidelines are followed. Any violations will required dismissal from program site.
15. The YMCA takes all accusations of child abuse seriously. To protect **children**, staff and/or volunteers accused of abuse may be suspended from the program. To protect **staff and volunteers**, children and/or parents making false accusations of abuse may be suspended from the program.
16. Weapons, including but not limited to, knives and or firearms are not allowed and may result in suspension

**Parent/Guardian Agreement:** I approve this registration, the above release agreement, and certify that my child is capable of such an experience. I also agree to pay ALL fees incurred by my child's registration and participation. I understand that cancellations/changes to my child(ren)'s enrollment status must be submitted, in writing, to the director of programs by May 21<sup>st</sup> to receive full refund minus a \$25 admin service fee. Cancellation of registration by the participant is nonrefundable after May 21<sup>st</sup>.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

