



Wilson County Public Libraries

**Sam Fore, Jr.
Public Library**
1103 4th Street
Floresville, TX 78114
830.393.7361

**Sarah Bain Chandler
Public Library**
602 West Street
Stockdale, TX 78160
830.996-3114

**Jane Y. McCallum
Public Library**
112 E. Chihuahua St.
La Vernia, TX 78121
830.253-1249

**Wilson County
Historical Commission**
1104 C Street
Floresville, TX 78114
830-393-7354

Transforming Lives through Knowledge and Information

Liability Release Form

This release is for any and all liability for personal injuries and property losses or damage occasioned by or in connection with this after hours event. The undersigned agrees to abide by all rules and regulations set forth by the Wilson County Public Libraries and the Friends of the Wilson County Public Libraries.

___ In the event that the individual(s) registered in during or after hours sponsored program(s) is in need of treatment at any emergency room or medical care facility, the Wilson County Public Libraries and/or other sponsoring agencies, has my consent to authorize treatment for the participant(s) by the doctor(s) of their choosing as the doctor(s) may deem necessary.

___ I, the undersigned, do hereby acknowledge that I have granted permission for minor(s) to participate in any and all after hour programs with full knowledge of the risks involved and I hereby agree to assume those risks and to hold the Wilson County Public Libraries and Friends of the Wilson County Public Libraries, free from liability for any injury, harm, and complication resulting from said participation in any and all programs.

___ Furthermore, I do understand that accident insurance is not provided by the Wilson County Public Libraries and/or other sponsoring agencies, and I hereby agree to assume full responsibility for any and all medical expenses resulting from any accidents or injuries suffered while participating in said program(s).

___ I also acknowledge that the event staff/volunteers may take photographs while participating in these programs and I grant permission for the library to use said photographs for the purpose of promoting and informing the community about these programs.

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

Child(ren)'s Name(s)
