

**Permission Slip for Summer Camp Newfield Pool Swim  
Program for 2024**

I give permission for my child to participate in the Summer Camp Newfield Pool Program. Newfield Pool is located on Helena St., Newfield and is approximately 2 blocks from Edgerton Christian Academy. I further give permission for my child to walk from Edgerton Christian Academy ("ECA") to Newfield Pool and swim from 3pm-5:30pm, weather permitting. I understand that my child will be accompanied by at least 2 camp counselors and 2 certified life guards. I understand that my child will not be permitted in the deep end of the pool unless he or she is able to pass "The Deep End Test". My signature also indicates that I am aware of and give permission for the Camp Staff to transport my child from the pool to the school in the event of inclement weather and that they will be using their private vehicles to do so. I am also aware that all children will be seat-belted in the cars and that the cars will drive carefully and slowly.

I understand that participation in the Summer Camp Newfield Pool Program may include both foreseen and unforeseen dangers, hazards, and inherent risks to which my child may be exposed, including but not limited to the risks of serious physical injury, damage to real and/or personal property, and possible illness from and exposure to infectious disease.

I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my child's attendance and participation in the Summer Camp Newfield Pool Swim Program.

I, on behalf of myself and my child, agree to assume all risks and responsibility for any injuries including but not limited to bodily injury, sickness, disease, and/or death, arising out of my child's attendance and/or participation in the Summer Camp Newfield Pool Swim Program. I, on behalf myself and my child, agree to release and hold harmless ECA and all of its officers, officials, agents, staff, volunteers, and/or employees and representatives ("Releasees") from any and all claims, liabilities, damages, or expenses, caused by or arising out of my child's participation and/or attendance in the Summer Camp Newfield Pool Swim Program, whether arising from the negligence of Releasees or otherwise, to the fullest extent permitted by law.

This Permission Slip and Release shall be governed by and construed in accordance with the laws of New Jersey.

I have read this Permission Slip and Release, fully understand its terms, and sign it freely and voluntarily.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Child(ren) name(s): \_\_\_\_\_

Grade(s): \_\_\_\_\_

Parent Daytime Phone Number: \_\_\_\_\_