



Summer Camp Registration

“BE GREEK FOR A WEEK”

June 20 -24, 2011 Cardiff-by-the Sea

NORTH COUNTY GREEK LANGUAGE SCHOOL

PARENTS – PLEASE READ CAREFULLY

Photographic Release

I permit the North County Greek School to use and publish photographs and/or video of me/my children for the purpose of presenting cultural activities to the community and to promote its Greek Language Educational programs. I also give permission to release such photographs and video to the news media in support of the educational and cultural programs.

I agree: Parent Name: _____ Signature: _____

Release from Liability and Indemnification (Please read before signing)

I agree to waive and release The North County Greek School of Saints Constantine and Helen (which includes its officers, teachers, employees, and volunteers) from any claims, cause of action, damages, losses, liabilities, or expenses for any personal injury, property damage or death arising out of my child's participation in the above activities and events, regardless of whether the personal injury, property damage or death was caused by the Greek Language School personnel or otherwise. I UNDERSTAND THAT SIGNING THIS WAIVER I AM FREEING THE NORTH COUNTY GREEK SCHOOL OF SAINTS CONSTANTINE AND HELEN FROM ANY LIABILITY RESULTING FROM MY CHILD'S PARTICIPATION IN THE ABOVE ACTIVITIES AND EVENTS. I CERTIFY THAT I HAVE PERSONALLY READ AND UNDERSTAND THIS WAIVER AND RELEASE.

Parent Name: _____ Signature: _____ Date: _____

