BATTLE OF THE BOOKS 2018 - Event Permission Form

We are very pleased to have your child participate in the 2018 Battle of the Books, a voluntary reading incentive program which encourages students to read good books and have fun while competing with their peers.

Event Permission, Release & Indemnity:

My signature on this form constitutes my agreement to accept full responsibility for my child’s participation in Battle of the Books, and my agreement to release, indemnify and hold harmless, the Westchester Library System (WLS), any employees of WLS or any of its member libraries from any and all claims, damages and/or causes of action or injuries which may arise out of or in any way be connected with my child’s participation in Battle of the Books.

My signature also constitutes my agreement to accept full responsibility, financially or otherwise, for any damage my child may do to the property of Westchester Library System, the Battle of the Books venue, or the personal property of other volunteers or participants.

The following is all of the insurance information, restrictions, allergy and medication necessary should my child require appropriate medical care.

__________________________________________
Parent/Guardian Name (printed)            Participant Name (printed)
__________________________________________
Parent/Guardian Signature/Date

Emergency Contact – Name and Phone Number