



SOLFUL 2019 Summer Program

VALENCIA PARK REGISTRATION IS OPEN NOW

Dates of Registration: May 13th - June 3rd

Last day to Register: June 3rd

Location: Valencia Park Elementary School 3441 W. Valencia Dr, Fullerton, CA 92833

Dates: June 10th - July 3rd

Days: Monday - Thursday

9:00am – 12:30pm

Grades: Entering 1st - 6th

LEADERS IN TRAINING (LIT): 7th - 12th

SOLFUL is a free summer program that provides academic support, student enrichment, and leadership development. Instruction and activities focus on math, science, reading, the arts, sports, and music. Free lunch will be provided by nutrition services.

Good attendance is critical for your child to be successful! ***Attendance will be taken at each session, and another student will take your child's place if they miss 3 sessions.***

Do you want to enroll your child in SOLFUL? Call or text Mrs. Donna Whitman with OC United for a registration form 310-213-2331

*This program is not a Fullerton School District sponsored event nor was the registration form prepared as a Fullerton School District expense.

AUTHORIZATION AND APPLICATION TO PARTICIPATE, RELEASE OF LIABILITY AND WAIVER

PLEASE PRINT. APPLICATION MUST BE COMPLETED IN FULL. ONE APPLICATION PER PARTICIPANT.

NAME OF PARTICIPANT: _____

PARTICIPANT BIRTHDATE: _____ GRADE ENTERING FALL 2018 _____

NAME OF PARENT OR LEGAL GUARDIAN: _____

ADDRESS: _____
(STREET) (CITY) (ZIP CODE)

PRIMARY NUMBER: (_____) _____ SECONDARY: (_____) _____

Please check one:

_____ **I will pick up my child at the end of the program time.**

_____ **I will arrange for someone else who is older than 12 years to pick up my child at the end of program time and walk home without supervision.**

AUTHORIZATION FOR MEDICAL TREATMENT

In case of accident or other emergency, I/we, the parent/legal guardian of the above stated participant, hereby give permission for OC United and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, to obtain emergency medical treatment for participant should medical treatment be required.

IN/WE acknowledge that OC United has no insurance to pay for the costs of medical treatment required by my/our child and do further acknowledge and agree that any such medical or related expenses incurred by my/our child will be my/our sole responsibility.

EMERGENCY CONTACT PERSON: _____

RELATIONSHIP TO PARTICIPANT: _____ PHONE: (_____) _____

PARTICIPANT'S DOCTOR: _____

TELEPHONE NUMBER: (_____) _____ SEIZURES: _____ YES _____ NO

IF "YES" PLEASE STATE HOW OFTEN AND WHAT TYPE OF SEIZURES USUALLY OCCUR:

PRESCRIBED MEDICATIONS: _____

OTHER MEDICAL CONDITIONS (PLEASE DESCRIBE, I.E. DIABETES, ALLERGIES, ETC.):

PHYSICAL OR DEVELOPMENTAL DISABILITIES, INCLUDING LEARNING OR MENTAL HEALTH SPECIAL NEEDS

(PLEASE DESCRIBE):

RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

For and in consideration of permitting my/our child to enroll in and participate in the SOLFUL program sponsored by OC United, I/we, the undersigned parent/guardian, hereby voluntarily release, discharge, waive and relinquish any and all actions or causes of action for personal injury, property damage or wrongful death occurring to the above stated participant arising as a result of

participation in said recreational program or any activities incidental thereto wherever or however the same may occur and for whatever period said program may continue, and the undersigned parent/guardian does for him/herself, his/her heirs, executors, administrators and assigns hereby release, waive, discharge and relinquish any action or cause of action, which may hereafter arise for him/herself and for his/her estate, and agrees that under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute or present any claim for personal injury, property damage or wrongful death against OC UNITED and its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees for any of said causes of action, whether the same shall arise by the negligence of any of said persons, or otherwise.

IT IS THE INTENTION OF _____ (parent/guardian initials) BY THIS INSTRUMENT, TO EXEMPT AND RELIEVE OC UNITED AND THE RELATED PARTIES MENTIONED HEREIN, FROM ALL LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY THE NEGLIGENCE OF ANY PERSON OR ENTITY.

In addition, the undersigned parent/guardian has been notified that participants involved in OC United sponsored programs are subject to being photographed or videotaped, and I/we hereby give permission for OC United to use such photographs or videotapes to publicize and promote OC United's programs.

MARK ONE OF THE TWO OPTIONS:

_____ **I give** my consent to OC United to use my name and likeness to promote OC United and their activities.

_____ **I do NOT give** my consent to OC United to use my name and likeness to promote OC United and their activities.

I/we, the undersigned parent/guardian hereby expressly acknowledge and agree that:

- 2. I/we knowingly and freely assume all risks of my/our child's participation in this program or event, and assume full responsibility for his/her participation
- 3. The undersigned parent/guardian, on behalf of said participant and for him/herself, his/her heirs, executors, administrators or assigns agrees that in the event any claim for personal injuries, property damage or wrongful death shall be prosecuted against OC UNITED and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, he/she shall defend, indemnify and save harmless the same OC UNITED and the aforementioned related parties from any claim, cause of action, loss, liability, damage, lawsuit, cost or expense (including reasonable attorney's fees) by whomever or wherever made or presented for said personal injuries, property damage or wrongful death.

The Undersigned acknowledges that I/we had personally read, understand, and voluntarily sign this release and waiver of all liability and indemnity agreement, am/are fully aware of the potential risk and hazards which are inherent to engaging in the specified recreational program or any activities incidental thereto, including but not limited to, any negligent acts performed by OC UNITED and/or its officers, officials, agents, contractors, volunteers, boards, departments, servants or employees, negligently created or maintained dangerous conditions of public property, weather conditions, equipment, machinery, playing conditions, other participants, on-site physical premises, structures or substantial works of improvement. The Undersigned voluntarily assumes all risks of loss, damage, or injury associated with his/her participation in the specified recreational program or any activity incidental thereto. Further, the Undersigned hereby agrees to inform OC UNITED of any changes to the information contained within this Authorization as soon as such new information is available.

AUTHORIZATION FOR PARTICIPATION

I / We authorize the above named participant to participate in the above stated program or event sponsored by OC UNITED.

SIGNATURE OF PARENTS/LEGAL GUARDIANS:

X _____

X _____

DATE: _____

DATE: _____

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