



Minor Informed Consent, Release

And

Express Assumption of Risk

Brights Zoo in Limestone, TN is proud to announce our zoo camps for kids program.

I, _____, Parent or Guardian of _____ desire that he/she participates in the Brights Zoo Camp program. I realize injuries can be a consequence of participation in this activity and no amount of reasonable supervision or use of the facility will prevent injury. I appreciate the character of the risk involved, and I voluntarily assume on behalf of myself or my child all risk of possible death, harm or injury. I understand and appreciate that such injury could also include, without limitation, serious or permanent injuries to all bodily organs and functions. I am aware of the risk of participation in this designated activity. I have carefully considered how the possible consequences of injury may impact my child's or my life, and I choose to accept this risk and allow him/her to participate in the designated activity.

I understand and agree that Brights Zoo is not responsible for any bodily injury or property damage that my child may incur, Brights Zoo will not pay any medical bills or other costs or damages to any incident occurring on the premises of Brights Zoo or related to the camp. I further agree not to sue Brights Zoo on my behalf or on behalf of my child in connection with these activities.

I agree to indemnify, defend, protect, and hold harmless Brights Zoo, its administrators, directors, employees, volunteers, agents, attorneys, successors, and assigns, from and against any and all losses, costs (including without limitations, litigation costs and attorney's fees), claims, lawsuits, actions, damages, liabilities, and expenses, in connection with loss of life, bodily injury, personal injury, or property damage, resulting wholly or in part from my child's use of Brights Zoo facilities, equipment, and premises or participation in Brights Zoo Camps.

I understand and agree to follow all rules of conduct, safety rules, and time limits provided by Brights Zoo.

I understand and agree that if rules and time limits imposed by Brights Zoo are not followed, Brights Zoo may revoke my child's participation in Brights Zoo Camps.

I have read and accept the above terms and conditions, and intending to be legally bound hereby have signed this Informed Consent, Release and Express Assumption of Risk on the date set forth below.

Printed name of parent or legal guardian

Signature of parent or legal guardian

Date

Thank you for choosing Brights Zoo Camps

Please check <http://www.brightszoo.com/camps> for a list of camps and prices.

My child will be attending camp on: _____

Camper Information

Camper's Last Name: _____

Camper's First Name: _____

Age During Camp: _____ Birth Date: _____ Sex: _____

Parent's or Guardian's Name (during camp) _____

Billing Information

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell _____

Phone: _____

Payment Information

Check made out of Brights Zoo Paid at Brights Zoo gift shop

Credit card: Visa Master Card Discover

Card Number: _____ Expiration _____

Date: _____

Cardholder's Name _____

(signature) _____

CSV (3 digit number of back of card) _____

Mail Payment to:

Brights Zoo
Attn: Zoo Camp
3425 HWY 11E
Limestone, TN 37681

