

Full Name of Minor

The Arsenal Central Park New York, NY 10065 www.nyc.gov/parks

CONSENT AND RELEASE WAIVER - VIRTUAL CLASSES FOR CHILDREN & YOUTH

	Date:	, 2023
Dear Parent or Legal Guardian,		
Given the COVID-19 pandemic the City of New York ("City"), a muracting by and through the New York City Department of Parks & Rethe children and youth of New York City ("City") by providing prograarts and crafts, fitness drills or exercise classes ("Program(s)").	ecreation ("NYC Parks"), contir	nues to serve
Some Program(s) will be provided through a virtual/online platform NYC Parks' staff will facilitate. The Program(s) will use software, to parties that participants, parents/legal guardians, volunteers and/or purposes of communication, programming and potential content cre	ools and applications provided l r staff will access via the intern	by third
This consent and release waiver ("Waiver") provide your consent a Program(s) utilizing an online Platform for distance-based, virtual p Platform(s) collects different information about its users and has its independent and separate from the City's and NYC Parks' technology conduct guidelines ("Policies and Guidelines") to which members make cannot control or assume responsibility. Please review these	program purposes. Please be a s own privacy terms and conditi ogy, social media policies and o must adhere, and which the City	ware that the ions, code of y or NYC
We are committed to keeping the participants safe and it is always actively monitor participants activities to our best abilities. All onlinemust also comply with the Platform(s)' Policies and Guidelines for participations.	e activities provided through th	
Below, please find the AUTHORIZATION, CONSENT AND RELEA ELECTRONIC COMMUNICATION INVOLVING MINORS FORM.	ASE FOR SOCIAL MEDIA OR	OTHER
I,, am the	e parent or legal guardian of	

I have received and reviewed the City's Technology and Social Media Policies including the NYC Parks' Code of Conduct guidelines.

I understand that I will have access to everything provided to my child and will be made aware of how social media is being used, be told how to access the sites, and be given the opportunity to be copied on all material sent to my child via social networking (including text messages).

I authorize and consent to NYC Parks staff or volunteer instructors to communicate with my child electronically, including via social media, text, email, phone and video conferencing tools (e.g. Zoom) in accordance with the Programs.

I authorize and consent to the publication and use of my child's name and/or my child's likeness for the purpose of promotion, publicity, advertising, or other manner or media by the City, NYC Parks or any other representative authorized to act on behalf of the afore-mentioned entity. I agree that the actual material involved is and shall continue to be the property of the City and that neither I, nor my child, shall have any right of review, approval, or compensation regarding the use of my child's name and/or likeness in such material.

I understand that if any staff or volunteers knowingly communicate privately with my child as a part of his or her duties for or on behalf of above NYC Parks, reasonable steps will be taken to send to me the same communication content, though not necessarily via the same technology.



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I acknowledge that to review or receive public communications shared via social media with my child, I will need to become a fan or follower of the same social media. I understand that communications or posts may be accessible or viewable by others who are also fans or followers of the same social media.

I understand that without this consent my child will not be able to participate in the Programs.

If I choose to rescind my authorization and consent provided herein, I agree that I will inform NYC Parks in writing and that my rescission will not take effect until it is acknowledged by NYC Parks.

I understand, however, that it may not be possible to recall any work, photos or videos that have been published as part of the Programs prior to receipt of my written rescission.

I have read this Consent and Release Waiver and have had the opportunity to consider its terms and understand them. I verify that I have read and voluntarily agree to the terms and conditions of this Consent and Release Waiver.

I recognize that fitness programs require physical exertion that may be strenuous and may cause serious physical injury, even death, and I am fully aware of the risks and hazards involved. I agree to assume full responsibility for any risks, injuries, loss or damages, known or unknown to my child incur as a result of participating in the Programs.

In the event that my child is injured in any way or suffer any medical condition as a result of his/her participation in the Programs, on behalf of myself, my heirs, agents or assigns, I hereby hold harmless, release and forever discharge the City along with their respective employees, agents, affiliates, sponsors or other representatives from, any and all claims, and shall indemnify them against, all demands or causes of action which I, my heirs, representatives, executors, administrators or any other person(s) acting on my behalf or on behalf of my estate have or may have by reason of my child's participation in the Programs and through my authorization, consent and release in this Waiver.

I have read this Consent and Release Waiver, I fully understand it, and I voluntarily agree to be bound by its terms. I represent and certify that I am the parent or legal guardian of the minor.

Child's Do	OB:		I Agree Yes	or No	·	
Parent/Le	gal Guardian Nan	ne (REQUIRED): _				
Email (RE	EQUIRED):			-		
Address/0	City (REQUIRED):					
State: <u>Ne</u>	ew York					
	ONIC SIGNATURI JR INITIALS HER					
on paper.	•	e, you are consen	ting to use of your ele	ectronic initials in lie	eu of an original signat	ure
Date: [SUBMIT]	/2023	3				