### **North Kingstown Recreation Hosts**

## Be Safe When Home Alone!

### 6:00-9:00PM \* Monday May 10, 2021

This class, a must for children 10 – 14 years of age, will help prepare your child to safely stay at home alone when necessary. Topics include: internet safety, telephone and fire safety, elements of first aid and steps to take in an emergency. Course material is presented in a relaxed and interactive format. Students will learn through role playing, games and acting out emergency situations.

Emma Alexander is a Certified American Heart Association CPR and First Aid instructor. She has been working at Mobile Medical Training for 5 years plus, teaching life-saving skills to the next generation.

It is imperative that all who are interested pre-register to allow the instructor time to prepare and know the minimum number for the class is attained

We at NK Rec take your health and safety very seriously. We will be abiding by the State COVID Guidelines that are subject to change. Masks are now required for participants, coaches, and volunteers over the age of 2. Please bring hand sanitizer. There will be a screening at drop off, in some cases, including temperature taking, please allow yourself an extra few minutes. If you answer YES to any screening questions or you have a temperature you will not be allowed to participate that day. At this time we are allowing minimal and in most cases no spectators. Athletes are recommended to get weekly COVID-19 tests. If you have tested positive or recently been in contact with a positive case inform your coach/instructor immediately. If you have a serious underlying health condition, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, or whose immune system is compromised discretion for participation will be advised. For additional information call the office or visit repoeningRI.com

We encourage Participant to bring snacks and drinks
Fee: \$50.00, Non-Resident Fee: \$55.00 Location: Cold Spring Community, 30 Beach Street
Make check payable to: Town of North Kingstown, 100 Fairway Drive or pay online by credit card
https://nkrec.recdesk.com/Community

Home Alone May 2021		
NAME	M F BIRTHDATE	
SCHOOLGRADE		
ADDRESS	028	
EMAIL		
PRIMARY PHONE	CELL PHONE	
SERVICE PROVIDER	RECEIVE TEXT NOTIFICATIONS? Y N	
MEDICALPROBLEMS?		
EMERGENCY CONTACT NAME ANI	O PHONE:	
PARENT/GLIARDIAN SIGNATURE		

## TOWN OF NORTH KINGSTOWN RECREATION DEPARTMENT

100 Fairway Drive North Kingstown, Rhode Island 02852

# Phone (401) 268-1542 MINOR'S CONSENT TO PARTICIPATE

#### AND HOLD HARMLESS AGREEMENT AND RELEASE

I, (Print Name of Minor's Parent or Legal Guardian)	state that
(Print Minor's Legal Name)	(hereafter referred to as "the
minor") the minor wishes to participate in (Print Name of B	Event or Program)
sponsored b	y the North Kingstown Recreation Department (the "Recreation
Department").	
the minor does not have to participate. It is understood that injury to the minor's person or damage to the minor's guardian(s) voluntarily accept and assume the risk of injur the minor's participation in the event or program. It is understood that the Recreation Department DOES N property; and minor's parent(s) or guardian(s) acknowled minor's own health care needs, and for the protection of the	cipation in the above event or program is VOLUNTARY and that at the event or program involves activities which could result in property, and that by participating, the minor's parent(s) or y to the minor or damage to the minor's property and consent OT provide any insurance coverage for the minor's person or dge that they are responsible for the minor's safety and the he minor's property.
agrees to release from liability, indemnify, and hold hard employees for any injury to the minor's person or damage as a consequence of the minor's participation in the even	mless the Town of North Kingstown, its agents, officers, and to the minor's property which arises out of or occurs during or tor program, whether or not such injury or damage may have to care on the part of the Town of North Kingstown, its agents,
• •	g upon the minor, the parent(s) or guardian(s), any successors alf.
	document is complete unto itself and that any oral promises or it and/or its terms are not binding upon the Town of North
that the above terms and conditions apply to said minor participate under ANY circumstances in the above specified	ardian of the minor whose name appears above. I understand r and to myself. I further understand that said minor cannot event or program without parental consent and that the minor agreement. This document is binding on myself, the said minor,
BY INITIALING I AGREE TO THE UNRESOLVED USE OF MY CHILD'S AND OTHER DEPICTIONS) FOR PUBLICIZING NORTH KINGSTOWN	NAME AND/OR LIKENESS (INCLUDING PHOTOGRAPHS, VIDEO TAPES, RECREATION ACTIVITIES AND EVENTS.
Minor's Name (PRINT):	Birth date of minor:
Home State of minor:	Today's Date:
Parent/Guardian Legal Name (PRINT):	
Parent/Guardian Legal Name (SIGN):	

#### Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

**North Kingstown Rec Programming** has put in place preventative measures to reduce the spread of COVID-19; however, NK Rec **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending NK Rec Programming, being exposed to the public, could <u>increase</u>** your risk and your child(ren)'s risk of contracting COVID-19.

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending NK Rec Programming and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NK Rec employees, volunteers, and program participants and their families even though North Kingstown Recreation is taking all possible precautions.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at NK Rec Programs or participation in NK Rec programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NK Rec, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of programs, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any programming.

Signature of Parent/Guardian Date

Print Name of Parent/Guardian Print Name of Participant(s)

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