

Dear Families,

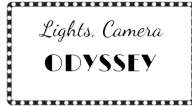
Odyssey Charter School is excited to once again offer a Summer Camp Program this year. This year's theme is Lights, Camera Odyssey. We will be covering math, literature, and english language arts skills, along with enrichment activities. Camp is from 9:00-12:00, Monday through Thursday and runs the first three weeks of June.

We would love for your student to join us this summer. If you would like your child to attend please fill out the attached form and return with the \$45 registration fee (per child) by March 1st. Please make sure to fill out one form for each child. If paying by check please make it payable to Odyssey Charter School. You can also use cash.

Sincerely,

Summer Camp Committee

****Returned checks will be charged a \$29 processing fee.****



Student Name: _____

Student Current Grade Level: _____

Student T-shirt size: Youth S M L Adult S M L XL 2XL

Parent(s) Name: _____

Parent Phone Number: _____ **Alt. Phone Number:** _____

Email Address: _____

Allergies:

Please list any required medication:

Please check the weeks your student will be attending camp:

- Week 1: June 3rd - June 6th
- Week 2: June 10th - June 13th
- Week 3: June 17th - June 20th
- My student will attend all three weeks.

_____ Camp will be from 9 am- 12 pm on Monday through Thursday. By writing your initials, you are acknowledging that you understand the camp dates and times.

____ By writing your initials, you are acknowledging that your camper will watch the trailer and clips from the following movies: *Jumanji*, *Alice in Wonderland*, and *Charlie and the Chocolate Factory*

____ Campers must be picked up at 12:00 pm. If your student is not picked up by 12:15 pm, they WILL NOT be able to return to camp. By writing your initials, you are acknowledging that you understand the time campers must be picked up.

____ Attached is the required \$45 registration fee which includes t-shirts and snacks.

The registration form and fee are due to the office no later than **March 1, 2024**. If you do not register your student for camp before this date your student will not be able to participate.

Please check this box if you would like a receipt.

**ODYSSEY CHARTER SCHOOL – SUMMER PROGRAM PERMISSION TO PARTICIPATE/
RELEASE, ACKNOWLEDGEMENT OF RISK, ASSUMPTION OF PERSONAL
RESPONSIBILITY AND INDEMNITY**

Child's Name: _____

Date of Birth: _____

I am the parent or legal guardian of _____, a minor.

This is a legally binding ASSUMPTION OF RISK, COVENANT NOT TO SUE, AGREEMENT TO INDEMNIFY, AND RELEASE AND WAIVER OF LIABILITY ("Agreement") made by me and my child in favor of Odyssey Charter School (the "School"). I wish for my child to participate in the 2024 Summer Program ("Program") on _____ and engage in the academic, athletic, student life, and leisure activities facilitated as part of the Program.

In consideration for the School allowing my child to participate in the Summer Program, I do hereby agree as follows:

1. My child's participation in the School's Program is voluntary and is of my own free will.
2. I understand that during my child's participation in the Program he/she may be exposed to risk or possible injury. I further understand that during my child's participation in the program he/she may be exposed to the risks of contracting illness, including but not limited to COVID-19.
3. I fully accept and acknowledge the associated risks and dangers and understand that I assume the risk for any injuries or damages resulting from my child's participation in this Program.
4. I willingly agree to comply with the stated and customary terms, conditions, and safety protocols for participation in this Program. I further agree to advise my child to comply with the instructions and directions of the Odyssey agents, volunteers and/or employees while participating in this activity.
5. On behalf of my child and my family, heirs, and personal representatives, I hereby accept and assume all risks (both foreseeable and unforeseeable) arising from or relating to my child's participation in the School's Program, and hereby assume all responsibility for all losses, costs, and/or damages related to such participation, even if caused, in whole or in part, by the negligence of the School or its employees or agents.
6. I hereby release and hold harmless the School and its employees, directors, officers, volunteers, members and agents from all claims, causes of action, demands, suits or liability in any regard for any and all property damage or bodily injury (including serious physical injury or even death) incurred by my child or any party related thereto as a result of his/her participation in the Program.
7. This Agreement shall be construed in accordance with the laws of the state of Georgia. Coweta County, Georgia shall be the exclusive forum for any lawsuits filed in connection with or pursuant to this Agreement. The terms of this Agreement shall be severable such that if a court of competent jurisdiction holds any term to be illegal or unenforceable, the validity of the remaining portions of this Agreement shall not be affected thereby and shall still be enforceable to the extent permitted by applicable law. I am fully competent to read and understand this Agreement, have carefully and thoroughly read it, fully understand its contents, and sign it of my own free will. My child is likewise entering into this Agreement and agrees to be fully bound by its terms.

Parent Signature

Print Name

Date