



685 Weaver Street, Larchmont, NY 10538
Tel: 914-834-1443 Fax 914-834-1447
www.sheldrakecenter.org

Girl Scout Troop # _____

Date of program: _____

Liability Waiver and Photo Release Authorization

Liability Waiver

I agree to take full responsibility for the actions, safety, welfare and belongings of my child,

_____ /
(child's name)

and release and discharge Sheldrake Environmental Center and agents from any liability arising from his participation in the event.

Photo Release Authorization

Also, I give Sheldrake Environmental Center permission to use photographs of my child for publicity, website, newsletters, etc.

Parent/Guardian Name _____

Telephone # _____

Email address _____

Signature _____

Date _____