

# Lock-In Permission Slip

Registration is **REQUIRED** for event attendance.  
(Register in the Calendar of Events at [www.pueblolibrary.org](http://www.pueblolibrary.org))



Friday July 26, 2019 at 6:00-8:00 pm. This program is exclusively for youth 9-13 yrs old.

**A guardian must sign the permission form below. This will be your ticket to enter the event.  
Youth will not be admitted without a signed form.**

- The building will be locked starting at 6:00 pm for the safety of both staff and participants. **Please arrive BEFORE 6:00 pm.** Parents may pick up their child/ children at 8:00 pm when the doors are unlocked and monitored by staff. If you need to leave before 8:00 pm, you must make special arrangements with the library staff when you arrive at the lock-in party.
- There will be a zero tolerance policy in regards to bullying. We will discuss the rules at the start of the event, and anyone not following those rules will be asked to leave. Please ensure your child has an understanding of this before the event.
- The library can be contacted at 719-493-0072 during the event in case of emergencies.
- Please hold on to this portion of the library permission slip.

## Library Lock-In Permission Slip

I give permission for \_\_\_\_\_ (youth's name) to attend the **Game Night Lock-In** at the Rawlings Library on **Friday July 26th** from **6:00-8:00 pm**.

By my signature, I hereby state that I understand the risks and responsibilities involved in my child's attendance at the event, and I willingly and voluntarily accept these risks. By my signature, I hereby surrender any right to seek reimbursement from the Pueblo City-County Library District and its directors, employees, volunteers and other agents for injury sustained and liability incurred during my child's attendance at the event. By my signature, I warrant that I am not relying on any oral representations, statements or inducement apart from the statements made on this form. By signing below, I confirm that I have read, understand and consent to the terms of this waiver agreement.

During the event, I may be reached at \_\_\_\_\_ (phone number).  
I understand that if my child engages in any inappropriate behavior, I will be called and asked to pick him/her up immediately.

Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date \_\_\_\_\_