

**Tampa's Lowry Park Zoo Teen Programs  
Parent/Guardian Consent, Medical & Publicity Release Form**

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I, \_\_\_\_\_ (printed name), the undersigned parent or guardian of \_\_\_\_\_ (child's printed name), DOB \_\_\_\_\_ age \_\_\_\_\_ understand and agree to all the terms below as pertains to the Tampa's Lowry Park Zoo's (TLPZ) Teen Programs that we are participating in:

1. I agree to allow my child to participate in all TLPZ's Teen Program activities. Participation in said activities is purely voluntary, and if at any time we feel uncomfortable with the activities we may notify the instructor-in-charge that we do not wish to participate and accommodations will be made for us to either observe or not be involved in the activity.
2. I understand that we choose to engage in hands-on tasks as a part of this program.
3. I understand that a TLPZ employee/volunteer will explain any safety rules before participating. I agree that we have a responsibility to ask questions, clarify any rules, regulations or instructions that we do not understand or have any doubt about.
4. I understand that this program may involve riding in an electric-powered cart, train or horse ride wagon as a part of any tour associated with the program.
5. I agree that we have a responsibility to ensure our child's full participation in TLPZ's Teen Programs and will support that by checking on progress and offering any assistance as needed.
6. I understand that transportation to and from Tampa's Lowry Park Zoo is the responsibility of the child and parent/guardian. If lack of transportation plays a factor in my child's participation, I will contact TLPZ's Teen Program administrators and attempt to arrange alternative methods of transportation.
7. I understand that TLPZ staff has the right and responsibility to dismiss any participant for disruptive behavior. No drugs, alcohol, stealing, smoking, or fighting will be allowed. In the event my child violates these rules or any other policies set by TLPZ, I understand I will be called to pick them up immediately, regardless of time.
8. I am aware that there are certain risks and dangers in any activity especially with those involving wild animals and/or endangered animals and their habitats and in consideration of participating, hereby waive, release, and hold harmless the Tampa's Lowry Park Zoo, Lowry Park Zoological Society of Tampa, Inc. and the City of Tampa and their respective associated agencies for any liabilities, claims, demands, or cause of action that arise from our own negligence.

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**Medical Release**

The law requires that parental permission be obtained for medical procedures on minors (under 18 years of age). The following consent form should be signed by a parent and/or legal guardian so that such procedures can be promptly carried out. We will make a genuine attempt to notify you in case of a serious emergency.

I, \_\_\_\_\_ understand that, in case of medical emergency, every effort will be made to contact me or the persons named in the "Emergency Contact Information" section on my child's application. If I cannot be reached, I hereby give permission to the physician selected by TLPZ to hospitalize, anesthetize, and secure proper treatment for my child as named above. I also hereby grant permission to the staff of TLPZ to dispense non-prescription medication including, but not limited to, Tylenol and Advil, to my child unless otherwise specified.

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**Film and Photographic Publicity Release:**

Yes (  ) No (  ) I hereby authorize TLPZ and its representatives to use, without obligation to me, any photographs and motion pictures taken of us as individual subjects for any and all publicity and advertising purposes they may designate in promotion of their not-for-profit mission.

Yes (  ) No (  ) We would like to participate in the group photographs for keepsake purposes and understand that these group photographs may be posted on TLPZs website.

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Parent/Guardian Name	Signature	Date
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Participant Name	Signature	Date
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