



Calvary Early Learning Center
Consent, Waiver and Release of Liability Form 2018-2019

I, _____, hereby certify that I am the Parent
or Legal Guardian of the minor child: _____

I hereby consent for my child to attend Calvary Early Learning Center and participate in all activities sponsored by Calvary Early Learning Center. I have inspected the premises and consulted with Calvary Early Learning Center employees, including teachers and instructors. I have determined that the premises are safe and I consent to leave my child in the care and custody of Calvary Early Learning Center. I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the school. I hereby grant permission for my child to leave the school premises under the supervision of a staff member for neighborhood walks or for field trips in an authorized vehicle. I hereby grant permission for my child to be included in evaluations connected with the school program.

I represent that my child is properly immunized against all childhood diseases or illnesses. I represent that I have advised Calvary Early Learning Center staff regarding any allergies or physical disabilities that my child may have. I agree to indemnify and hold Calvary Early Learning Center, its directors, employees, and agents harmless against any and all claims arising from injury or illness my child may suffer as the result of food allergies or disabilities that I previously disclosed to Calvary Early Learning Center, or food allergies or disabilities that I had knowledge of but did not disclose.

I represent that my child has health insurance coverage and I agree that I will maintain said coverage during the entire time my child attends or participates at Calvary Early Learning Center. I have been advised that Calvary Early Learning Center does not provide health insurance or medical coverage to my child, in any form, under any circumstances.

I agree to indemnify and hold Calvary Early Learning Center its directors, employees and agents harmless against any and all claims arising as a result of my child attending and/or participating in the activities of Calvary Early Learning Center.

I authorize Calvary Early Learning Center and its directors, employees and agents to provide first aid care, or emergency medical care to my child and/or to obtain such emergency medical care for my child as may appear reasonably necessary in my absence, including emergency transportation to a hospital. I agree to be financially responsible for any and all medical expenses or costs that are incurred in treating my child for illness or injury when said illness or injury arises as while my child is on the premises of or in the custody of Calvary Early Learning Center.

I CERTIFY THAT I HAVE READ THE ABOVE AGREEMENT AND AGREE TO THE TERMS THEREOF.

Parent's signature

Date