

Cottage Garden Home School Co-op

Liability Waiver

Aug. '11 – May '12

Family Name: _____

Please list children: _____

Please list children: _____

Home Phone: _____ Cell Phone: _____

Address: _____ Zip: _____

I/we, as parent(s) or guardian(s) of the above named youth, do hereby agree to allow my/our child to participate in Cottage Garden activities.

I/we recognize that participating in Cottage Garden including physical fitness classes offer many benefits for my/our child. I/we also acknowledge that participation involves certain risks and hazards of injury to my/our child and/or property damage.

In consideration of the opportunity for my/our child to participate in Cottage Garden, I/we hereby RELEASE, ACQUIT, DISCHARGE, and COVENANT TO INDEMNIFY and HOLD HARMLESS Calvary Baptist Church and Cottage Garden, its directors, officers, agents, and employees, and/or the sponsors, from any and all liability, claims, demands, actions, and/or causes of action arising out of or relating to any loss, damage or injury sustained in connection with my/our child's participation in this co-op. This unconditional release includes, but is not limited to, any claims, demands, actions, and/or causes of action related to negligence, negligent supervision, liabilities arising out of the decision to seek treatment of any sickness or accident, and financial responsibility for all medical treatment provided to my/our child during Cottage Garden.

Parent or Legal Guardian Signature

Date

REGISTRATION INFORMATION

Please complete the following form and bring it with you to registration

Parents' names: _____

Mailing address: _____

Home phone- _____

Cell phone- _____

Email- _____

(Most communication is through e-mail with CG)

Children's names and ages as of Sept. 1, 2011

(Please list your children's name as they would like to be called at school.)

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ I have read the Cottage Garden policy form in its entirety and
am in agreement with the policies.

Signed: _____

Date: _____