

Campus Pre-School

RELEASE OF CLAIMS AND WAIVER OF LIABILITY

PLEASE READ CAREFULLY: By signing this Release of Claims and Waiver of Liability, you, your family and representatives give up the right to sue.



TO: Campus Pre-School

IN CONSIDERATION OF Campus Pre-School permitting me to register my child _____ in, and for my child to attend Campus Pre-School, on behalf of myself, my child, my heirs, executors, successors, administrators, assigns and whomsoever else may have an interest either at common law or by operation of statute, I agree to and do hereby waive any and all claims I or they may have now or in the future, and release from all liability and agree not to sue Campus Pre-School, its Board, teachers or parent-volunteers for any personal injury, death, property damage or other loss suffered or sustained by my child while attending Campus Pre-School, whether resulting from my child's participation in Campus Pre-School programs or otherwise, due to any cause whatsoever, including, without limitation, negligence, but not including gross negligence, on the part of any of the Campus Pre-School, its Board, teachers or parent-volunteers. For greater certainty, but without limiting the generality of the foregoing, claims for sexual or physical abuse are not waived.

IN ENTERING INTO this Release of Claims and Waiver of Liability Agreement, I am not relying on any oral or written representations or statements made by Campus Pre-School, or any of its employees, representatives or agents to induce me to register my child in Campus Pre-School.

I CONFIRM THAT I have read and understand this Release of Claims and Waiver of Liability Agreement prior to signing it and I agree that this Agreement will be binding on myself, my heirs, executors, successors, administrators and assigns.

SIGNED this ___ day of _____ 20 __, at _____, Alberta.

NAME (Parent or Guardian)

WITNESS

Signature

Signature