

# After School Program Waiver Form Sample

Participant Information

Child's Name:

Date of Birth:

Parent/Guardian Name:

Emergency Contact

Emergency Contact Name:

Emergency Phone Number:

Waiver & Release of Liability

I, the undersigned parent or legal guardian, understand and acknowledge that participation in the after school program involves inherent risks, including, but not limited to, physical injury and property damage. I voluntarily accept full responsibility for these risks and hereby release and waive all claims against **[Program/Organization Name]**, its staff, volunteers, and affiliates for any injuries or losses incurred during participation.

In the event of an emergency, I authorize program staff to secure any necessary treatment for my child as deemed appropriate.

☐ I have read, understand, and agree to the terms above.

Parent/Guardian Signature:

Date:

Submit