

Parent Waiver Form
SPANISHCLASS4PEQUES

Student's Full Name: _____

Grade: _____ Room #: _____ Teacher: _____

Parent/Guardian Name: _____ Emergency Cell Number: _____

After Class Pick-Up Procedure: _____

I, the undersigned parent or legal guardian of the above-named student, hereby acknowledge and agree to the following terms and conditions:

1. Assumption of Risk:

I understand that participating in Spanishclass4peques, LLC activities, including but not limited to after-school classes, may involve certain inherent risks. These risks may include physical activity, minor injuries, and unforeseen accidents. I acknowledge that my child's participation in these activities is voluntary and that I assume all risks associated with their involvement.

2. Medical Considerations:

I hereby certify that my child is in good health and capable of participating in the activities offered by Spanishclass4peques, LLC. I understand that it is my responsibility to inform the program staff of any relevant medical conditions, allergies, or special requirements that my child may have. I authorize the program staff to seek medical attention for my child in case of an emergency if I cannot be reached.

3. Release of Liability:

I release and discharge Spanishclass4peques, LLC, its officers, managing member, managing partner, employees, instructors, Nancy Davis, and volunteers from all claims, liabilities, damages, or expenses arising out of or in connection with my child's participation in the tutoring classes or after-school program. This includes any injuries, losses, or damages incurred because of negligence or otherwise, to the fullest extent permitted by law.

4. Code of Conduct:

I understand and agree that my child is expected to follow the rules and code of conduct set forth by Spanishclass4peques, LLC. I will ensure that my child understands and respects the guidelines provided by the program staff. I acknowledge that failure to adhere to these guidelines may result in disciplinary actions, including suspension or expulsion from the program.

I have read and understood the contents of this waiver form, and I voluntarily sign it with full knowledge of its legal consequences.

Parent/Guardian's Signature: _____ Date: _____

Please print this form, sign it, and return it to Nancy Davis before your child participates in the Spanish immersion program.

If you have any questions or concerns regarding this waiver form, don't hesitate to contact us. I appreciate your cooperation.

Seño Nancy

nancy@spanishclass4peques.com

(310) 889-4261