

PTO After School Enrichment Program Waiver

Injury: I understand that participants in the Academy Charter School PTO After School Enrichment Program do so at their own risk and ACS does not provide accident insurance, as with any other school.

I give permission for my child, _____ to participate in the Academy Charter School PTO After School Enrichment Program. In doing so, I hereby absolve the Academy Charter School PTO, its officers, volunteers and instructors from any and all liability that may arise as the result from above named child's participation in said Enrichment Program. I recognize and acknowledge that there are certain risks inherent in my child's participation in said program and I agree to assume the risk of accident or injury sustained in connection with the program. I further release Academy Charter School, its employees, agents and volunteers from any and all liability that may arise as the result from above named child's participation in said program. I have read and fully accept and understand the terms of this Waiver, Release and Indemnity.

Parent/Guardian Signature

Date