

Community Education: Las Positas College

YOUTH Participant Waiver Form

1. This completed and signed form MUST accompany each participant to the first-class meeting.
2. A SEPARATE FORM is needed for each activity.
3. Las Positas College requires all participants to have a form on file with the instructor.

Participant's name _____ Date of Birth ___/___/___
Gender _____ Age _____ Grade _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Work Phone _____ Cell Phone _____
Emergency Phone: _____ Name of Contact _____

Agreement, Waiver, Release, Information on Late Pick Up Charges

In consideration for being permitted by Las Positas College to participate in the activity listed below, I hereby waive, release and discharge any and all claims for damage for personal injury, death or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance Las Positas College (its officers, employees and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

Parental Consent: (to be completed and signed by parent/guardian if applicant is under 18 years of age). I hereby consent that my child, _____ can participate in the activity listed, and I hereby execute the Agreement, Waiver and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons or entities mentioned above free and harmless from any loss, liability, damage, cost or expense that they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

(over)

Activity Name: _____

Medical Consent to Treat

I hereby consent that _____ participate in the activity listed, and I hereby execute the Agreement, Waiver, and Release on their behalf. I hereby agree to indemnify and hold the persons or entities mentioned above free and harmless from any loss, liability, damage, cost or expense that they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. You have my permission to seek medical treatment for this minor child in an emergency.

Picking Up Your Child Agreement

I agree that Las Positas College is not responsible for students who provide their own transportation and/or voluntarily leave campus at any time, or for students who leave with classmates or friends during the time period of the class

I agree to pick up my child at the exact end of class each day. If my child remains with the instructor longer than 15 minutes after the class ends, I agree that my child will be transferred to the Security office, if possible, and I will be charged \$10 per each 15 minutes that the child resides on the campus. I am also aware that my child is my liability and responsibility up until the published start time of the class, and after the published end time of the class. This fee must be paid immediately when I pick my child up.

I have carefully read this agreement, waiver, release, and late pick up agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the above entity, and I sign it of my own freewill.

Print Name _____ Relationship _____

Signature _____ Date _____

This form must be completed and turned in to the instructor at the first activity meeting or the participant will not be allowed to participate until it is completed. No refunds will be issued for days not participated.