

HILLSIDE ACADEMY

RELEASE OF LIABILITY AND ACCIDENT RELEASE FORM

Liability Release

I understand that Hillside Academy is not responsible for any accidents or injuries that may occur as a result of my child(ren) participating in any sport or in using any equipment and/or facilities. I will not hold Hillside Academy or any of its staff liable for any such injury, should my child be injured while participating in an organized sport.

I give permission to Hillside Academy or person representing Hillside Academy to give emergency treatment, including first aid and cardiopulmonary resuscitation (C.P.R.) to my child(ren), when they deem necessary. I give authority for my son/daughter to be taken by ambulance, aid car, staff member's car or other vehicle to the nearest hospital or other hospital I specify, in case of emergency. I allow said hospital to administer treatment to my child in the event I am unable to be reached or present when care is needed. If the doctor or persons responsible for my child cannot be reached, I accept Hillside Academy's arrangements for emergency treatment and hospital admittance. I agree to accept primary financial responsibility for the cost of emergency treatment, including transportation by ambulance or aid car.

In case of emergency, I understand that HA will make every attempt to contact parents. If parents are not available, I give permission to either of the two other contact persons in case of emergency that I fill in on the Acknowledgement Form to make decisions on behalf of my child(ren).

Signature

10/2/14 sab