#### **General Liability Waiver & Release of Claims**

Child's Full Name: _	
Date of Care:	

This waiver is intended to release the provider from liability for any unforeseen events or injuries that may occur while your child is in care during "Mom's Night Out" services.

# **Acknowledgment of Risk:**

I understand that while all safety precautions will be taken, participation in any child care program involves certain risks, including but not limited to minor injuries (bumps, scratches, etc.), allergic reactions, and emergency situations.

### I acknowledge that:

- My child will be supervised by qualified caregivers.
- The provider is CPR/First Aid certified.
- Reasonable care will be taken to prevent injury and maintain a safe environment.

**Assumption of Responsibility:** I voluntarily place my child in the care of the provider for the specified date and assume full responsibility for any risk of injury, illness, or other incident that may occur, whether caused by ordinary negligence or otherwise.

## **Medical Emergencies:**

I give permission for the provider to seek emergency medical care for my child if needed, and I release the provider from liability related to emergency decision-making or treatment.

#### Waiver of Claims:

I hereby waive, release, and discharge the provider, staff, and any affiliates from any and all claims, liabilities, demands, or actions arising out of or related to participation in this child care program.

This waiver applies to all legal guardians, parents, and assigns.

# **Parent/Guardian Agreement:**

By signing below, I confirm that I have read, understand, and voluntarily agree to this waiver and release of liability.

Parent/Guardian Name:	
Signature:	
Date:	
Phone Number:	
Email Address:	