

RELEASE AGREEMENT

As the parents or legal guardian of:

_____ (Child's Last and First Name)

I (We), _____ and _____
Mother First and Last Name Father First and Last Name

give my (our) permission to ALPHA SUMMER CAMP staff to release my son/ daughter _____ from school premises without supervision.

I (We) will take full responsibilities for my (our) child after he/she leaves the school premises.

I (We) further agree to waive the right to press legal charges against ALPHA SUMMER CAMP., its officers and staff, in those instances.

I have read the Agreement of Release. In the event this agreement is executed by one parent, I acknowledge that I am also acting as the agent of the other parent with the authority to enroll my child into ALPHA SUMMER CAMP, and agree to execute this agreement on his or her behalf.

Signatures: Mother _____ Father _____ Date _____

Authorized Guardian _____ Date _____

Subscribed and sworn to before me this _____ day of _____, 20__

Notary Public or Commissioner of Deeds

County of