

WATERSLIDE/FIELD-TRIP PERMISSION FORM AND LIABILITY WAIVER
Art Smart Academy After-School/Community Center

I _____, the parent of _____ (“my child”), give permission for my child to utilize the Bounce-House Waterslide on-site at ASA.

I understand that personal injury can and may occur to my child, and I hereby authorize **all ASA Camp Staff & After School Instructors** or another appointed youth advisor, to seek and consent to emergency medical attention for my child as needed; and I further agree to be liable for and to pay all costs incurred in connection with such medical attention.

I hereby release **Art Smart Academy After-School/Community Center**, its employees, agents and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury (including death) that may be sustained by my child while participating in or traveling to and from off-site Field-Trips.

The following is all of the insurance information, restrictions, allergy and medication information necessary for my child to receive appropriate medical care.

I give permission for my child to ride in any vehicle designated by **ASA**, its employees and adult volunteers, while participating in and traveling to and from all Field-Trips through the year.

I agree to accept full responsibility, financially or otherwise, for any damage my child may do to the property of **ASA After-School**, properties visited on outing, other’s personal property, or vehicles used for transportation.

I agree and consent to all of the above stated.



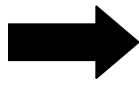
(Parent Signature) (Date)

(Emergency Contact Name and Phone Number for the Day of the Trip)

Community Standards

In accordance with the Public Education Standards of South Carolina, the following behavior will not be tolerated at any **ASA** children/youth gathering. Violation of these standards, or being knowingly in the presence of others violating these standards, can and will result in consequences deemed appropriate by ASA Staff, Instructors, & Interns including, but not limited to, being sent home immediately at the participant’s expense.

- *Bullying. Name-Calling, Abusive Language, or Cursing
- *Physical Violence toward students and/or staff and/or interns.
- *Unauthorized use of electronics or gaming devices/FREE-TIME FRIDAY ONLY PLEASE!
- *Refusal to accept punishment of Time-Out or Removal of Privileges.



(Parent Signature) (Date)



(Youth Signature) (Date)