

PERMISSION SLIP

1 give permission for my child		
from	School to go to	on (date)
Comments / speci	al considerations / notes:	
release and discharge Coresponsibilities or liabili	OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY onnectikids Inc. ("CT kids"), its agents, employees, stafficies for injuries or harm incurred as a result of my partics and activities, including rock wall activities at Connect	members, directors, and officers from any claims, cipation and/or my child's participation as a player
be caused by my own ac the Activity takes place, ECONOMIC LOSSES eith	these activities involve risks and dangers of serious bod tions or inaction's, the actions or inaction's of others p or the negligence of the "RELEASEES" named below; (c er not known to me or not readily foreseeable at this ti BIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a	articipating in the Activity, the condition in which) there may be OTHER RISK AND SOCIAL AND me; and I FULLY ACCEPT AND ASSUME ALL SUCH
best judgment, in an em officers from any respor	agents, employees, staff members, directors and office ergency and I hereby release discharge CTKIDS, its agents is in the state of the	nts, employees, staff members, directors and S permission to use my and/or my child's name,
Signed	Print Name (Parent / Guardian)	
Date/		
Parent / Guardian	's phone number (home)	
Parent / Guardian	's phone number (cell phone)	
	I will be attending this fieldtrip.	
	I will NOT be attending this fieldto	rip.