

Lake Village Learning Center

I have received a copy of the New Parent Handbook and a copy of the Mississippi State Department of Health Regulation Summary for Parents. I have read both and understand the policies and procedures for my child's daycare.

Child's (Children's) Name: _____

Parent/Guardian Signature:

Date: _____

INSURANCE

Liability Release Form

In consideration of allowing the previously declared participant(s) to begin participation in Lake Village Learning Center activities, while on the premises and property of said Center, the undersigned, for themselves, and/or being the legal and acting guardian of participant(s), acting for themselves and on behalf of the participant(s), release and hold harmless Lake Village Learning Center, its owners, employees, and agents of and from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises upon which Lake Village Learning Center is conducted, or any premises under the control and supervision of Lake Village Learning Center, its owners, officers, employees, or agents or in route to or from any of the said premises, or while at any premises or place when activities sponsored by or participated in by Lake Village Learning Center, its owners, officers, agents, or employees.

Parent/Guardian Signature _____

Date _____