**Sweet Home Academy Liability Waiver and Acknowledgement of Risk**

**Please Read and Sign Below**

I understand and agree that in participating in any class activity, outside play, food experience, extracurricular activity or field trip, there is a possibility of physical injury or death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any activity at Sweet Home Academy. I also exempt and release Sweet Home Academy, its owners, director, employees, volunteers, contractors, guests, guest artists, and fellow students and their parents/guardians from any and all liability claims, demands, or causes of action whatsoever from any loss, damage, injury or death to me, my child or property which may arise out of or in connection with participation in any classes or activities conducted by Sweet Home Academy. I understand that I should be aware of my physical limitations and the physical limitations of my child and agree not to exceed them.

If I am signing this waiver for my child, I certify that I am the parent or legal guardian and have the right to sign on their behalf.

**I have read, understand and agree to be bound by the above statement. Please print/sign your name and date below.**

**Printed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Student (name of student):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_