

Waiver of Liability

I hereby give my permission for my child to participate in a D.C. Everest Community Services Youth program with the knowledge that he/she is not covered by school insurance. I further agree to provide health/accident insurance in the event of any injury while my child is participating in this program. We do waive all claims and liabilities we now or may in the future hold against the Community Services Office, coaches, supervisors, and/or employees.