



PALISADES

CHARTER HIGH SCHOOL

RELEASE OF LIABILITY FOR CHILDREN VISITING PCHS

I, _____(parent/legal guardian, hereby release the Palisades Charter High School and its employees and duly authorized agents from any and all liability, including potential and prospective liability, should my child(ren)_____, _____ and _____ become injured or otherwise harmed or potentially or prospectively harmed while visiting school and/or district property. I further authorize _____ (name of sponsoring employee if not parent or legal guardian) to maintain custody of my above name child(ren) during their visitation to PCHS.

Parent/Legal Guardian

Date of Activity or Event: _____

Name(s) (Printed) _____

Street Address, Apt.# _____

City, ZIP _____

Telephone (Home) _____

Emergency Contact (Name) _____

Telephone _____

Signature of Parent(s)/Legal Guardian: _____

Date: _____

Note: This form must be completed, signed, and returned to the school principal or site manager at least two weeks prior to the requested visting dates.

Approved

Not Approved

Signature of Executive Director/Principal _____

Date: _____