

PARTICIPANT AUTHORIZATION AND TRANSPORTATION WAIVER FORM

TRANSPORTATION AUTHORIZATION

I authorize Nature Story Montessori staff to provide transportation services to the participant in conjunction with field activities, and hereby voluntarily release, waive, discharge, hold harmless Nature Story Montessori and its owners, agents, and employees from and against any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise as a result of the providing of transportation services to myself or my child including without limitation transportation to, from, or during any activity.

I agree to see that my child is appropriately prepared for transportation to and from field trips, and to provide needed safety devices and car seats for vehicle transport. I will not expect Nature Story Montessori to provide these items.

PARTICIPANT WAIVER, ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AND RELEASE CLAIMS FORM

I hereby consent to participate or my child may participate in any on-site and off-site program affiliated with Nature Story Montessori, and I hereby execute this Agreement, Waiver, and Release on my or his/her behalf. I understand the program offered through Nature Story Montessori will take place in a dynamic environment and may include, but is not limited to, the following potentially hazardous indoor and outdoor activities: hiking, swimming, games and events, fishing, general exploration. I state that I, or said minor, is physically able to participate in said activities. I understand that the inherent risks of these activities include the following: personal injury, property damage, illness, or death.

I understand that camp activities may include play and outdoor activities, hikes and walks in the woods wherein there could be mosquitos, bees, ticks, poison ivy, and

slippery and jagged surfaces among other dangers and risks. I understand that my child may be near and in streams, rivers, lakes, and bodies of water.

I also understand that outdoor activities may occur in the hot sun and in the rain. I agree to see that my child is appropriately attired for camp activities, and to provide insect repellent and sunscreen for my child to use at camp. I will not expect Nature Story Montessori to provide these items. I give my permission for Nature Story Montessori camp leaders to apply or assist with the application of the repellent and sunscreen I provide.

I understand that my child may be near and in different bodies of water. These activities include but are not limited to streams, creeks, rivers, lakes, sprinklers, water, more water, lots of water. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. Every attempt will be made to safeguard students. I agree to see that my child is appropriately attired for water activities, and to provide a life jacket and other needed safety devices. I will not expect Nature Story Montessori to provide these items.

The information given on Nature Story Montessori's forms is correct and complete to the best of my knowledge, and Nature Story Montessori has my consent to share the information with all personnel who will be supervising my child for the duration while at Nature Story Montessori or who may be responsible for the welfare of myself or my child.

As a parent/guardian, I am committed to being available to answer a phone call from Nature Story Montessori and its staff. I have provided a phone number to Nature Story Montessori where I can be reached at any time during operating hours. I also commit to being available or making arrangements for my child to be picked up for any reason.

I, or my minor child, will cooperate and comply with all reasonable directions and instructions received from Nature Story Montessori staff, will follow all safety rules while participating in activities and will be familiar with the expectations and consequences of behaviors should I or my child choose not to cooperate.

I understand that any violation of program rules will result in consequences, and ultimately dismissal from the program and I will not receive a refund for any unused portion of the prepaid tuition and transportation is my responsibility. I hereby represent and warrant to Nature Story Montessori that I have the authority to execute this Participant Waiver Form on behalf of myself and/or on behalf of my minor child(ren) or ward(s) as parent/guardian.

In consideration for being permitted to participate in Nature Story Montessori activities, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, or my child, as a result of participation. This release is intended to discharge in advance Nature Story Montessori staff (its officers, employees, volunteers and agents) and Nature Story Montessori from any and all liability arising out of or connected in any way with my, or my child's participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. Every attempt will be made to safeguard students and equipment. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to release and to hold Nature Story Montessori or the above entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my, or said minor, death or any injury or property damage that I, or said minor, may sustain while participating in said activity.

I specifically understand that I am releasing, discharging, and waiving any claim or actions that I may have presently or in the future for the acts or other conduct by the owners, agents, officers, or employees of Nature Story Montessori.

I have read this entire "acknowledgement and assumption of risk and release claims" and fully understand the contents. My signature indicates that I have satisfied my questions and concerns. I understand that this release is a contract. I expressly state that I have read, understand and am familiar with all its provisions and that I sign it of my own free will.

PLEASE READ AND SIGN MUST BE SIGNED BY PARENT OF LEGAL GUARDIAN OF MINOR

I hereby state that I am the parent or legal guardian of the minor whose information appears in this registration form. I am familiar with this consent and agree to the term and provisions set forth in this release.

I consent to having this waiver signed by digital signature.