

Chrysalis

experiential academy

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PARENTAL WAIVER AND RELEASE

I, _____, the mother/father/parent/or legal guardian of _____, give permission for him or her to participate and engage in the activities described below. On behalf of _____, I HEREBY WAIVE AND RELEASE Chrysalis Experiential Academy, Inc. (hereinafter the Released Party) from any and all liability to the abovementioned minor. I am fully aware of the risks involved in such abovementioned activity, and on behalf of such minor, release from liability _____, and waive any claim such minor may have as a result of an accident, mishap, or negligence of the Release Party and/or any other party under or affiliated with Released Party.

This waiver shall be binding on said minor, myself, his or her heirs, assigns and next of kin, and shall extend to the benefit of release Party and its successors and assigns. I understand that the activities that the above named minor will be involved in are inherently dangerous and may cause serious injuries, including bodily injury, damage to personal property and/or death. By this waiver, the named minor assumes the risk, and takes full responsibility and waives any and all claims of personal injury, bodily injury, damage to personal property and death relating to _____ activities undertaken at the _____, including but not limited to any activities while Claiming Party is physically on such premises.

To the best of my knowledge, the abovementioned minor does not have any physical limitations, medical ailments, physical or mental disabilities that would limit or prevent him or her from participating in the abovementioned activity.

I have read and fully agree to the terms of this waiver and release. I understand and confirm that by signing this waiver and release I have given up considerable future legal rights that the abovenamed minor and I may have against the abovenamed released party. I have signed this waiver freely, voluntarily, under no duress or threat of duress. Without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a compete and unconditional waiver and release of all liability to the full extent of the law. I am mentally competent to enter into such an agreement.

I declare the foregoing is true and correct. Signed on this _____ day of _____, 20__

In the County of _____, State of Georgia.

Parent/ Legal Guardian