

Art Classes for Kids Waiver of Liability

Name:			
Address:		 	
Email:	 	 	

Phone: \_\_\_\_\_

I, the above named, give permission for my child to participate in all activities of CoolitArt Classes. I release CoolitArt from all liabilities, including any injury to my child arising from participation in activities. I agree to indemnify CoolitArt for any liability due to the child's participation in activities.

I have read, understand and agree to the policies as stated on the terms and conditions

Parent Signature:

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