

Bowen Playhouse Performers Release & Consent Form

I/We, the undersigned parent(s) or guardian(s) of _____ give
(Child's Name)

Permission for my/our child to participate in the Bowen Playhouse Performers on days my child is in attendance at the Bowen After School Program and all its activities and trips as well, unless prior notice is given by I the undersigned parental guardian saying otherwise. I/We also promise to honor the financial obligations that our child's participation on such trips may result in. I/We forever RELEASE, Acquit, discharge and covenant to hold harmless the Bowen After School Care Program and its officers, directors, employees, servants and agents from any and all actions, causes of actions, claims, demands, costs, loss of services, expenses and compensation on account of, or arising out of, directly or indirectly, any personal injuries or property damage which I/We may hereafter have as the parent(s) or guardian(s) of the above-named minor child and also all claims or rights of action for damages which said minor child may acquire, either before or after s/he has reached for his/her majority, resulting from his/her participation in Bowe Playhouse Performers described herein.

Parent's Name

Date

Child's Name

Grade

Days in Attendance at BASCP

