

## Big Apple Youth Sports – Extended Dismissal Waiver

I understand that **Chess & Education.** (“Provider”) is responsible for coordinating the dismissal and release of each participating child to his or her parent or guardian (“Guardian”) each day at the conclusion of its after-school program (the “Program”) from 5:00pm ET until 5:10 pm ET (“Initial Dismissal”). **I further acknowledge that at the end of each Initial Dismissal, Big Apple Youth Sports (together with its personnel and its agents, affiliates, or other representatives, “BA”) assumes responsibility for coordinating the continued dismissal and release of each participating child to his or her Guardian until 5:45 pm ET or the release of the last child (“Extended Dismissal”).**

I give permission for my child to be released to the care of BA at the end of each Initial Dismissal until the end of Extended Dismissal, and give permission for my child to receive emergency first aid treatment by BA in the unlikely event of an injury. I understand that every effort will be made to contact me before and after medical care is provided, and if I cannot be reached, I give my consent to BA to obtain the necessary medical care for my child, which may include transportation by ambulance or other vehicle to an emergency center. I agree to pay all of the costs associated with the emergency medical care that my child receives, and understand that BA will not cover any medical expenses due to injury received through my child’s participation in the Program or incurred during Initial Dismissal or Extended Dismissal. I understand that this consent will be in effect as of the date of my signing this form and will continue as long as my child is enrolled in the Program.

I voluntarily release, forever discharge, and agree to indemnify and hold harmless BA from any and all claims, demands or causes of action which are in any way connected with my or my child’s participation in the Program and during Initial Dismissal or Extended Dismissal, or my child’s use of the Program’s or BA’s equipment or facilities, including any such claims which allege negligent acts or omissions of BA except if such claims, demands, or causes of action arise out of BA’s gross negligence or willful misconduct.

Should BA or anyone acting on their behalf be required to incur attorney’s fees and costs to enforce this waiver, I agree to indemnify and hold them harmless of all such fees and costs.

I acknowledge that if anyone is hurt, or property damaged during my child’s participation in the Program or during Initial Dismissal or Extended Dismissal, a court of law may find me to have waived my right to maintain a lawsuit against BA on the basis of any claim from which I have released them herein.

I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THE ENTIRE DOCUMENT. I HAVE READ AND UNDERSTOOD IT, AND I AGREE TO BE BOUND BY ITS TERMS.

**Child Name:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Relationship to Child:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

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

**Parent/Guardian Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_