AUTHORIZATION & ACKNOWLEDGEMENT FORM 2022–2023

Student's Name	
Parent Handbook	
I have received and read a copy of the Louise Hayem Manl policies and procedures.	heim Gates Preshool Parent Handbook containing school
Parent/Guardian Signature	Date
Photo Release	
· · · · · · · · · · · · · · · · · · ·	ruse in school displays, portfolios, publications and web site er consideration in perpetuity. These photographs are used
I have read and understand the above statement. Please in	ndicate your preference below.
I DO grant permission for my child to be photographed	
I DO NOT grant permission for my child to be	photographed
Parent/Guardian Signature	Date
raterry Sudraiari Signature	Date
Printed Name	Child's Name



SPECIAL COVID-19 MINOR WAIVER & RELEASE OF LIABILITY 2022–2023

I am aware that there are risks associated with me and/or my child contracting and/or being exposed to COVID-19 by entering the preschool or CGoP facility, being in contact with Gates Preschool or CGoP employees, or receiving services from the preschool or CGoP during the COVID-19 pandemic.

On behalf of myself and my child, I knowingly assume all possible COVID-19 exposure risks, both known and unknown, relating to my child's presence in the facility or receiving services from the preschool.

I hereby forever release, waive, relinquish and discharge the preschool and CGoP, along with its owners, officers, directors, managers, employees, agents, insurance carriers or other representatives, and their successors and assigns (collectively, the "Gates Preschool/CGoP Representatives"), from any and all claims, demands, liabilities, rights, damages, expenses, and causes of action of whatever kind or nature, and other losses of any kind, whether known or unknown, foreseen or unforeseen, in any way related to the COVID-19 pandemic, (collectively, "Damages") as a result of me and/or my child being enrolled in the preschool/CGoP or receiving services from the preschool/CGoP, all limited to claims based on the alleged exposure to and contraction of the COVID-19 virus because of any actions or inactions of any Gates Preschool/CGoP representative.

I further promise not the sue or bring any claims against Gates Preschool/CGoP, based upon any alleged exposure to or contraction of COVID-19 during any interactions between the preschool/CGoP and my child or myself.

READ CAREFULLY—BY SIGNING THIS WAIVER YOU MAY GIVE UP IMPORTANT LEGAL RIGHTS.

Minor Name Printed	Parent/Guardian Name Printed	
Date	Parent/Guardian Signature	