

# Waiver and Release of Liability For All Enrichment Programs

(Covers after-school activities, vendor-led programs, school-led camps, off-campus trips during camp, and promotional media use)

This form must be signed by a parent or legal guardian for any student participating in an after-school enrichment activity or camp offered by SDFAS.

## 1. Voluntary Participation & Program Scope

I understand that my child's participation in any SDFAS enrichment or camp activity is entirely voluntary and not a condition of school enrollment. By signing below, I give permission for my child to participate in all related activities, including but not limited to athletics, creative arts, academic workshops, games, and supervised outdoor play.

#### 2. Fees & Registration

I agree to pay all fees as posted by SDFAS on its registration platform and understand that my child's enrollment is not confirmed until full payment is received. I acknowledge that I have reviewed the cancellation and refund policy.

#### 3. Student Conduct

I understand that my child must adhere to the behavioral standards of SDFAS. The school reserves the right to remove any student from a program without refund if they engage in unsafe, disruptive, or inappropriate behavior.

## 4. Assumption of Risk

I acknowledge and accept that participation in enrichment or camp programs may involve inherent risks, including but not limited to:

- Minor injuries (cuts, bruises, sprains, bug bites)
- Physical activity-related incidents (falls, sports injuries)

- Emotional stress or fatigue
- Exposure to infectious illnesses, including COVID-19

I assume full responsibility for these and all other associated risks, whether known or unknown.

#### 5. Medical Consent & Insurance

I authorize SDFAS staff and affiliated personnel to administer first aid and, if necessary, to arrange for medical or dental care for my child in the event of an emergency. I understand that SDFAS does not provide medical insurance and that I am responsible for all associated costs. A completed medical form may be required for certain programs.

## 6. Field Trip Consent

Some programs may include off-campus field trips. Parents will be notified in advance and may decline participation in writing.

By signing this form, I give permission for my child to participate in all field trips unless I notify the school in writing prior to the trip. I authorize SDFAS staff to transport and supervise my child during such outings.

## 7. Campus Supervision & Transitions

I understand that depending on age and enrollment, my child may be supervised in areas of the campus different from their homeroom classroom. For example:

- 2-year-old students may be moved to the Preschool (PK) building and recess grounds during after-care.
- Kindergarten students may have supervised access to the Elementary campus during extended care.

All transitions are managed by trained and background-checked staff.

## 8. Force Majeure

In the event of disruption caused by natural disasters, public health emergencies, or other unforeseen circumstances, SDFAS reserves the right to modify, cancel, or move programs online. Refunds may be limited or unavailable depending on the situation.

#### 9. Media Release

#### **School Media Use**

Parents authorize the School to photograph and/or to make video or audio recordings of Student, or to use Student's name, voice, signature, photograph or likeness, in any and all School publications or promotions in any media whatsoever, for any period of time that may extend beyond Student's participation in the Camp and/or After Care, and without compensation from the School.

#### **External Vendor Media Use**

SDFAS partners and approved external enrichment vendors may also ask to photograph or record students during their activities or events. These images or videos may be used by vendors for their own promotional or internal communications.

#### Please select one:

$\square$ <b>YES</b> , I give permission for my child's photograph, voice, and/or video to be used by approved external vendors.
$\square$ <b>NO</b> , I do not give permission for my child's image, or voice to be used or shared by external vendors.

#### 10. Parent Contact Information Release

Would you like us to share your name and email address with the SDFAS enrichment vendors teaching your children this term so they may add you to their newsletter or contact you about classes, events, or promotional offers not affiliated with SDFAS?

## Please select one:

$\square$ YES, I give permission to share my contact information with vendors for outreach.
□ NO, do not share my information with third-party vendors.

### 11. Release of Liability

To the fullest extent permitted by law, I release and hold harmless San Diego French-American School, its officers, employees, contractors, volunteers, and enrichment partners from any and all liability or claims related to my child's participation in the enrichment or camp program, including injury, illness, or property damage, except in cases of gross negligence or intentional harm.

# 12. Third-Party Activity Disclaimer

I understand that certain classes are operated by independent vendors who are not employees or agents of SDFAS. The school is not responsible for any acts, errors, or omissions of third-party providers, though all are background-checked and approved.

## **Acknowledgment and Signature**

I have read and understood this waiver and agree to the terms and concabove.	litions outlined
Student Name:	
Parent/Guardian Name:	
Signature:	_
Date:	