

RELEASE OF LIABILITY

I, _____ (Parent or Guardian) release the
Georgetown Homeschool Group from any liability for my child(ren)

_____ (PRINT each child's
name in the blanks)

During classes, time in the Teacher's Lounge, field trips, or any other scheduled
Event.

Signed _____ Date _____

Signed _____ Date _____

(Please have both parents sign when applicable)

*Insurance that has been purchased for the co-op covers damage to the facilities
as well as secondary coverage to your primary insurance.