



GENERAL LIABILITY RELEASE & WAIVER

GENERAL LIABILITY RELEASE, WAIVER OF CLAIMS, ASSUMPTION OF RISK, AND HOLD HARMLESS AGREEMENT

Student Name: _____

Date of Birth: _____

Parent/Guardian Name(s): _____

Phone Number: _____

Email Address: _____

Emergency Contact Name & Phone: _____

I, the undersigned parent or legal guardian of the above-named student, understand and acknowledge that participation in activities associated with Someplace Special Micro School may involve certain risks, including but not limited to physical activity, indoor and outdoor recreation, gym or movement activities, hands-on learning projects, field trips, and interactions with other students.

I voluntarily allow my child to participate in all school-related activities and acknowledge that injuries may occur despite reasonable supervision and safety procedures.

I hereby release, waive, discharge, and hold harmless:

- Someplace Special Micro School
- JL ENTERPRISES LLC
- Laren Eggleston
- Jilanne Eggleston
- Employees, assistants, volunteers, contractors, and representatives of the school
- Octane Gym and/or Arcane Gym, including its owners, staff, employees, contractors, and facility representatives

from any and all liability, claims, demands, actions, damages, costs, or expenses arising from or related to injury, illness, accident, loss, or damage that may occur during participation in school activities, except in cases of gross negligence or willful misconduct.

I certify that my child is physically able to participate in school activities and that I will disclose any medical, behavioral, emotional, or physical conditions that may affect participation or supervision.

Medical Information / Allergies:

In the event of an emergency, I authorize school staff to obtain emergency medical treatment for my child if I cannot be reached immediately.

I understand that I am financially responsible for any medical care provided.

Parent/Guardian Signature: _____

Printed Name: _____

Date: _____