

Release from Care

Child's Name: _____ DOB: ____/____/____

Beginning Date: ____/____/____ Ending Date: ____/____/____

I/we understand that after-hours programs are not operated under the umbrella of Centerville Baptist Church Weekday Programs and therefore the mandates for compliance with the Code of Virginia applicable to the Programs is voluntary for the sponsoring business providing the after-hours class/program.

I/we acknowledge that my child's participation in after-hours programs held on the premises of Centerville Baptist Church campus are not staffed or supervised by Centerville Baptist PreSchool Programs employees, officers, directors or volunteers.

I/we release and hold harmless any/all employees, officers, directors or volunteers of Centerville Baptist PreSchool Programs/Church of responsibility for supervision and care for my child while participating in after-hours programs held on the premises of Centerville Baptist Church campus.

Printed Name	Signature on Behalf of both parents/Guardians	Date
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DO NOT SIGN THIS DOCUMENT UNTIL YOU ARE IN THE PRESENCE OF A NOTARY.

_____	Daytime telephone numbers: _____
(Signature on behalf of both Parents/Guardians)	
State of Virginia, City of _____, to wit:	
Subscribed and acknowledged before me this ____ day of _____, 2____.	
My commission expires _____.	
