



RELEASE FORM

* PLEASE PRINT NEATLY AND FILL OUT FORM COMPLETELY *

Registration Date : _____

Student's English Name : _____ Student's Chinese Name : _____

Date of Birth : _____ / _____ / _____ Home Phone : _____
Month Day Year

Home Address : _____

Father's Name : _____ Mother's Name : _____

School Name : _____

Little Mustard Seed, as a State of California Corporation, provides a fun and safe learning environment for every one. However, in any program, injuries may occur. In order for Little Mustard Seed to be able to provide learning services to you, it is necessary that you assume certain risks. Thus, as a requirement to receive our services, Little Mustard Seed is requesting that you sign this release.

I, on behalf of myself, my spouse, and each child designated on the Admission Form Agreement (my "Family Members"), waive and release all rights, causes of action and claims against Little Mustard Seed Inc. a California corporation, its Officers, Directors, Agents and Employees, for any and all loss of or damage to property or injuries suffered by my Family Members during the time my Family Members visiting Little Mustard Seed, including the possible negligence of Little Mustard Seed, but excluding gross negligence and intentional misconduct. I understand that the provision of such services contains risk of injury to persons and damage to property, and that by signing this release I engage Little Mustard Seed to provide services for my Family Members at my own risk.

I have been given an opportunity to ask questions and obtain answers to my satisfaction regarding any and all aspects of Little Mustard Seed and the Release, including, but not limited to, future risks, complications and costs. By signing this Release, I have not relied on any promises or statements made by Little Mustard Seed other than those contained in the written information supplied to me by Little Mustard Seed.

I understand that this Release will be kept on file at Little Mustard Seed and will continue in effect for this and any future visits my Family Members may make to Little Mustard Seed.

I HAVE READ THE ABOVE CAREFULLY AND HAVE FULLY UNDERSTOOD THE CONTENT AND CONSEQUENCES OF THIS AGREEMENT BEFORE SIGNING.

*

Signature of participant; If under 18, by Parent/Legal Guardian

Date