



ポートランド日本語継承学校
Keisho Japanese School of Portland

Parental Authorization and Waiver/Release of Liability

I, _____, parent or legal guardian of _____, a minor child, hereby give permission for my child to participate in indoor and outdoor activities conducted by Keisho Japanese School of Portland.

I certify that my child is physically, mentally and emotionally able to participate in the activity described above. In consideration of being permitted to participate in the activity, I hereby voluntarily release Keisho Japanese School of Portland and its hosting facility from any and all liability resulting from or arising out of my child's participation.

I understand and agree that I am releasing not only the entities set forth above, but also their officers, directors, ministers, administrators, principal, and other persons in the capacity of teachers, supporting teachers, managers, or staff of Keisho Japanese School of Portland and heirs and assigns of any of these parties (hereinafter individually and collectively "KEISHO parties").

I understand and agree that this Waiver/Release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I or my child may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me or my child, arising out of participation in the activity.

I understand and agree that by signing this Parental Authorization and Waiver/Release of Liability, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me and/or my minor child while participating in the activity. I understand and agree that by signing this Parental Authorization and Waiver/Release of Liability, I am agreeing to release, indemnify, and hold harmless Keisho Japanese School of Portland and its hosting facility and KEISHO parties from any and all liability or costs, including attorney fees, associated with or arising from participation in the activity. I understand that this Waiver/Release of Liability will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children, and any guardian ad litem for said children.

I acknowledge that I have read this Parental Authorization and Waiver/Release of Liability and that I understand the words and language in it. I also understand that this Parental Authorization and Waiver/Release of Liability is valid for the duration of time that my child participates in the activity unless rescinded through my written instructions.

I am the parent or legal guardian of the minor, _____, and I am signing this Parental Authorization and Waiver/Release of Liability on behalf of said minor.

Student's Home Address: _____

Street Address City State Zip Code

Home Phone #:(_____) _____

Student's date of birth: ____/____/____
mm dd yyyy

Print Student Name: _____

Print Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____