

Parent's Approval and Student, Family and Participant Waiver

9353 Wethersfield Road, Santee

Carlton Oaks School

(619) 956-4500

-Hallov -Movie -Father I so he good memerge will ass I hereb medicing physici	veen Night Night r Son Event reby certify that the nental and physical and physical and physical and responsive that the reactions, or an or which complease write none	-Father Daughter Event -STEM Night -Mother Daughter Event It to the best of my knowledge a sical health. In case of illness or to be administered. It is further nsibility for any action, including the above named minor or partical runusual physical condition while uld limit participation:	-Mother Son Event -Winter Event and belief said minor or pa accident, permission is g understood and agreed the payment of costs. pant(s) has had the follow	-Fun Run -Art Night rticipant(s) is/are in ranted for nat the undersigned wing allergies,
-Hallow -Movie -Father I so he good memerge will ass I hereb medicing physici	veen Night Night r Son Event reby certify that the nental and physical and physical and physical and responsive that the reactions, or an or which complease write none	-Father Daughter Event -STEM Night -Mother Daughter Event t to the best of my knowledge a sical health. In case of illness or to be administered. It is further nsibility for any action, including the above named minor or partical runusual physical condition while uld limit participation:	-Mother Son Event -Winter Event and belief said minor or pa accident, permission is g understood and agreed the payment of costs. pant(s) has had the follow	-Fun Run -Art Night rticipant(s) is/are in ranted for nat the undersigned wing allergies,
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Santee or dem	School Distric	ent or legal guardian assumes a ny and all of the PTA sponsored t, California PTA, all PTA officer mage, loss or injury to the stude ticipation in these activities, unl	activities. I hereby releases, employees and agents ent, the student's property	se and discharge the from liability, claims from parent's property
			Date	
Print N	ame of Parent/	Legal Guardian/Participant		
Signati	ure of Parent (le	egal guardian) or Participant if c	ver 18	
Addres	SS	City	State	Zip Code