

**H.O.M.E. Activity Release and Waiver of Liability Form**

I, \_\_\_\_\_, give my permission for \_\_\_\_\_  
to participate in the HOME Kids' Days and/or Teen Events throughout the school year.

Please read, check and initial the following boxes:

- I understand that I, or my child, is responsible for transportation to and from the event and for any costs incurred.
- I understand that although every event will be chaperoned by at least two adults and that every effort will be made to insure the safety of all those involved, an accident could occur.
- I will not hold HOME, the HOME Board, nor any of its members responsible for any injury, physical or otherwise, incurred to any of the participants during the activities.
- I give my permission to the adult chaperones of each event to seek medical help for my child if needed.

Printed Names of both parents \_\_\_\_\_

Signatures \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Name of Insurance Provider \_\_\_\_\_

Group Number \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency phone number/s \_\_\_\_\_