



Santa Monica Montessori School

1909 Colorado Avenue • Santa Monica, CA 90404

Phone: (310) 829-3551 • Fax: (310) 829-7272 • E-Mail: infomontessori@gmail.com

RELEASE AND DISCLAIMERS

Child's Name: _____ Parent(s') Name(s): _____
Address: _____ City & Zip: _____
Date: _____ Phone: _____

1. HOME PHONE NUMBER AND EMAIL RELEASE

I request that my home phone and / or address:

- ☐ Be given
- ☐ Not be given

To any parent whose child is enrolled in the Santa Monica Montessori School now and at any future time, until this form is revoked by me, in writing. I understand that the child may reveal his/her number, home address, or email address at his/her own discretion and that the school will not be liable for such release of information. (Home phone numbers and email addresses are generally needed for birthday parties and weekend visits.) Addresses and phone numbers are NEVER given out to vendors.

Parent's Signature _____

2. PICTURE RELEASE

I hereby grant Santa Monica Montessori School permission to allow pictures to be taken of my child for birthday parties, field trips, music recitals, special holiday events, for web pages and educational purposes. The child's name will never be used. In the event that a major motion picture studio, television studio, or newspaper requests permission to take the child's picture, a special release form will be sent to the parent IN ADVANCE, and WITH THE PARENTS ADDITIONAL APPROVAL, before such a picture will be taken.

Parent's Signature _____



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3. PARTICIPATION RELEASE FORM GYMNASTICS AND SOCCER

Recognizing the nature of a child is such that even the most careful, scrupulous, expert supervision cannot prevent, or guarantee against spontaneous, unpredictable mishaps or accidents, I hereby relieve the Santa Monica Montessori School and hold harmless its employees, officers or agents, et al, from any responsibility for such accidents resulting in an injury to any minor child in the schools custodial care. This is true whether such activity be on or off the school campus; whether involved in a school activity or while on a field trip; whether on the playground equipment or participating in games; during or after school hours. If an accident does occur and the question of liability should arise as to the circumstances of such mishaps, I hereby warrant that I agree to consult a professional arbitrator to obtain the legal and binding opinion for determining that a basis for further legal action does or does not exist. I certify that I have medical insurance for my child.

I hereby acknowledge and understand that courses in martial arts (Karate, Tae Kwon Do, etc.) and activities that involve the physical body totally (Gymnastics) must by their very nature result in body contact with other children or equipment. You warrant that you will provide reasonable, careful and judicious supervision at all times. We acknowledge, however, that the nature of a child is such that unpredictable actions may result in accidental mishaps that in no way could be guarded against.

Therefore, I hereby release Gymnastics and the selected Martial Arts Center and /or teachers and the employees from any liability for such untoward accidents, or from any injuries resulting there-from. Where any question exists, I agree to accept and abide by, the legally binding opinion of a legal arbitrator as to whether any basis for further action, or suit exists.

Parent's Signature _____



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4. ELEMENTARY STUDENTS ONLY -- WALKING EXCURSIONS/ SANTA MONICA RECREATION AND PARKS DEPARTMENT

PARTICIPATION RELEASE FORM

If my child goes on walking excursions, I understand that he/she will always be under the constant, expert supervision and care of his/her teachers. However, children being children, I understand that even under the most reasonable and judicious supervision that you warrant you will provide, there may be unavoidable mishaps, or accidental occurrences that could not be foreseen, or guarded against. In such a case, we mutually agree that we will seek the opinion of a legal arbitrator, and abide by his/her decision as to whether any further legal action would be warranted.

I hereby absolve and agree to hold harmless the City of Santa Monica, its employees, officers and agents, et al, from any liability, which may result from the participation of any minor in my legal custody, in the Santa Monica Swim Program, and / or playground activities. I sign this disclaimer on behalf of my child (or child I have enrolled and am responsible for) and grant permission for his/her participation in these activities, and grant authority for any necessary or emergency medical treatment without recourse to legal action. I will not initiate such action, for any reason whatsoever, without first obtaining the legally binding judgment of a professional arbitrator, that in his/her opinion, a basis for such action exists.

Parent's Signature _____

5. ELEMENTARY STUDENTS ONLY -- FIELD TRIPS VIA SCHOOL BUS

I hereby grant permission for my child to go on field trips as scheduled for the class, under supervision of the teachers and drivers. Furthermore, I hereby understand that I will be notified in advance of all pending field trips and know the particulars concerning time, date, destination, mode of transportation, entrance fees, and other data. (If the parent does NOT want his/her child to go on a designated field trip, the parent may call the school office (310-829-3551) and/ or send a note to the school office indicating his/her wishes regarding that field trip). The child may remain in another classroom, in that event.

Parent's Signature _____