

ACTIVITY WAIVER

Attention all parents/guardians:

The California State Department of Education requires that a child must be signed in and out of a Children's Center Facility by an adult. The State defines an adult as a person at least 18 year of age.

If you choose to allow your child to attend an activity on school grounds, you are requesting a waiver of this policy. The OCD staff cannot walk your child to or from the activity. Your child must be able to attend the activity alone. Please assist your child with the time and place of any activity they will be participating in.

Please complete this form and return it to the OCD office one week before the activity starts.

This form must be on file in ot	ir office for your child to leave	the classroom.
Student's Name	School Name / Aftercare Classroom	
Parent's Name (Please Print)	Parent's Signature	Date
I understand and I accept full res	ponsibility for my child to atte	nd the following
activity on school grounds. Add	<mark>itionally, I understand I must</mark>	report to OCD
immediately if my child experi	ences or is exposed to COVII	<mark>D symptoms.</mark> If
you do not adhere to this guideling	ne, your child will be dis-enrolle	ed.

Activity Name	Day of Week	Start Date	End Date