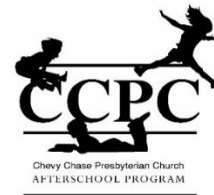


CCPC AFTER SCHOOL PROGRAM PERMISSIONS AND ACKNOWLEDGMENTS

PLEASE COMPLETE 1 FORM PER FAMILY



TRANSPORTATION PERMISSION

MY CHILD(REN) _____ HAS(HAVE) PERMISSION TO BE TRANSPORTED BY CCPC STAFF MEMBERS FROM LAFAYETTE ELEMENTARY SCHOOL IN THE CASE OF EXTREME WEATHER OR AFTER SCHOOL ACTIVITIES. SEAT BELTS WILL ALWAYS BE WORN BY CHILDREN AND STAFF MEMBERS WHILE RIDING IN THE CCPC VAN. CHILDREN UNDER THE AGE OF 8 WILL RIDE IN CHILD SAFETY SEATS AND BUCKLED IN BY A CCPC STAFF MEMBER. ALL SAFETY PRECAUTIONS WILL BE OBSERVED.

IMAGE RELEASE

I HEREBY CONSENT TO THE USE OF PHOTOGRAPHS/VIDEOS TAKEN OF MY CHILD DURING THE COURSE OF THE SCHOOL YEAR FOR PUBLICITY, PROMOTIONAL PURPOSES OR EDUCATIONAL PURPOSES (INCLUDING PUBLICATIONS, PRESENTATIONS, INTERNET, OR OTHER MEDIA SOURCES.) I DO THIS WITH FULL KNOWLEDGE AND CONSENT, AND WAIVE ALL CLAIMS FOR COMPENSATION FOR USE, OR FOR DAMAGES.

_____ **NO**, I DO NOT GIVE CONSENT FOR THE USE OF MY CHILD'S IMAGE BY CCPC AFTER SCHOOL PROGRAM FOR ANY PURPOSE.

PARENT HANDBOOK AGREEMENT

AS PARENT OR GUARDIAN OF THIS CHILD, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO ABIDE BY THE POLICIES AND PROCEDURES OF THE CHEVY CHASE PRESBYTERIAN CHURCH AFTER SCHOOL PROGRAM CONTAINED IN THE CCPC ASP PARENT HANDBOOK FOUND ON OUR WEBSITE www.ccpcasp.com.

INSURANCE WAIVER

I UNDERSTAND CCPC AFTER SCHOOL PROGRAM HAS INSURANCE COVERING CERTAIN INJURIES, ACCIDENTS OR DEATH OCCURRING DURING AFTER SCHOOL PROGRAM HOURS. I HEREBY WAIVE ALL CLAIMS THAT ARE NOT COVERED BY SAID INSURANCE AGAINST ANYONE AFFILIATED WITH CCPC AFTER SCHOOL PROGRAM, INCLUDING WITHOUT LIMITATION THE DIRECTOR, EMPLOYEES OF CCPC AFTER SCHOOL PROGRAM, AND PERSONS AFFILIATED WITH CHEVY CHASE PRESBYTERIAN CHURCH.

PARENT/GUARDIAN PRINTED NAME: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____