



3700 Katella Ave. Ste. 202
Los Alamitos, Ca 90720
949.9878.3786
brittany@ocnetworks.org

Page 1 of 2

Liability Waiver

This Liability Waiver Form must be completed and signed by the parent or guardian for the enrolled participant ("STUDENT") before participation in Orange County Networks, Inc. "drop-off program" ("OCN") instructional programs ("PROGRAM"). In consideration for receiving permission to enroll and participate in "OCN", I hereby:

1. Acknowledge, agree and represent that the undersigned enters this agreement freely and voluntarily with all information fully disclosed by OCN "drop-off Program" School.
2. Fully understand, as parent(s) or legal guardian of the aforementioned student (s), who will attend OCN during the current year in the aforesaid instructional programs ("PROGRAMS"), that my child(ren)'s participation in PROGRAMS involves risk of accidents or personal injuries. Therefore, on behalf of my child(ren), my spouse/partner and myself, the undersigned has hereby agreed to release, waive, discharge and covenant NOT to sue and to hold harmless OCN , its board members, teachers, contractors, volunteers, administrative officers, employees and any other associated personnel including owners or landlords of the premises utilized by the OCN , of and from any and all claims, actions and damages for accidents, personal injuries, emotional distress, disabilities or death that my child or any of my family members have or may have sustained as a result of participation in this PROGRAM.
3. Further agree to take full responsibility for my child(ren) to observe, follow and obey any and all OCN rules.
4. Moreover, if necessary, the undersigned authorizes OCN to seek emergency medical treatment for my child at an available medical facility at my own expenses. In the event that the undersigned should observe or discover any unsafe personal conduct or unsafe physical condition on the premises of OCN, the undersigned has agreed to report the unsafe conduct or condition to OCN "drop-off Program" representative as soon as possible.



3700 Katella Ave. Ste. 202
Los Alamitos, Ca 90720
949.9878.3786
brittany@ocnetworks.org

5. Further, permission is hereby granted by the undersigned to OCN to publish photos of my child(ren) (no names mentioned) in newsletters, website and other public relations presentations; and personal identifications of my child(ren) such as first name, last name, email address and username (where applicable) could be used for communications in all OCN activities.

6. By registering for online classes, the undersigned agrees 1) to follow OCN online technology and computer use policies and guidelines, and 2) to allow OCN to provide personal identifying information for their child(ren) such as first name, last name, email address and username (where applicable).

7. Further, the undersigned has agreed to take full financial responsibility for any damage to OCN facilities and equipment caused by my child or family members or myself. This acknowledgment of risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Parent Signature : _____ Date: _____

Parent Name: _____ Phone: _____

Parent Email: _____

Parent Address: _____

Child(ren) Name(s): _____
