



10555 Spring Cypress Road, Houston Texas 77070 281-378-4080 Fax: 281-378-4081

**Waiver of Liability for Information Release 2019/2020**

*This form is for use by parents to enable the teachers to give information to the person (other than the parents), picking up the child on a regular basis. e.g. babysitter, nanny, grandparent, carpool etc.*

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_

hereby request The Adventure Preschool to release information/records as listed below to:

**Name:** \_\_\_\_\_

**Caregiver (if different from parent's) Email Address is required for Newsletter, Email Reminders.**

\_\_\_\_\_

**Information to be disclosed:**

- Any and all information normally reserved for parent/legal guardian
- Accident Report  Incident Report
- Biting Reports  Academic Progress
- Newsletter (email)  Reminder Emails

Per this directive, I hereby release and forever hold harmless The Adventure Preschool from any and all claims relating to or arising from the release of such information/records.

\_\_\_\_\_

*Signature*  
**(This must be signed in front of the Notary)**

*Date*

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_

Signature of notary officer: \_\_\_\_\_

State of: Texas  
County of: Harris

Seal: