

Release of Liability

I _____, hereby sign this liability release form taking full responsibility of my son/daughters participation in the **Friday Night Social Group program**. I acknowledge liability and release from any and all liability of injuries, loss or damage to personal property that may arise in the event of my son/daughter's participation in the **Friday Night Social Group program** occurring in or around Community Living York South's premises or at any community based location/s.

Participant Name: _____

Parent/Guardian Signature

Date (mm/dd/yyyy)

Witness Signature

Date (mm/dd/yyyy)