



Lipson Family Coaching

Strengthening your Family

Consent for Class Participation

I _____, legal guardian of _____ do hereby give consent for my child (named above) to participate in Lipson Family Coaching, Inc programs. I agree to release, hold harmless and waive all claims and causes of action that may hereafter accrue to me against Lipson Family Coaching, Inc and additional and/or substitute instructors associated with any injury that may be caused as a result of any action other than the sole negligence of additional and/or substitute instructors. I further agree to indemnify and hold harmless Lipson Family Coaching, Inc and additional and/or substitute instructors, from any action or inaction of my child that may cause any injury or damage whatsoever. I give full permission for my child to participate in all activities and agree to notify Melissa Lipson, owner of any precautionary measures that should be noted or taken during group classes. In the event of any injury to my child, I hereby grant full power of attorney to Lipson Family Coaching, Inc and additional and/or substitute instructors to obtain any emergency medical treatment they (in their sole discretion) deem necessary in the best interest of my child. I will assume responsibility for fees incurred by such an emergency.

Legal Parent/Guardian Signature: _____ Date: _____

Photo Release I grant Lipson Family Coaching, Inc permission to take photographs of my child and publish on their website and in printed promotional materials.

Please check: Yes ___ No ___

Payment due in full before first session.