



LIABILITY RELEASE WITH PARENTAL CONSENT  
FOR MEDICAL/EMERGENCY  
TREATMENT AND TRANSPORTATION

CHILD'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

EMERGENCY CONTACT

\_\_\_\_\_  
(Name/Phone No./Relationship)

The undersigned(s) being the lawful parent(s) and/or guardian(s) of the above child, hereby consent to the participation by the child in all tutoring and mentoring activities conducted by iL.E.A.D. Success Tutoring and Mentoring and to the participation of the child in all events related to said activities.

The undersigned hereby further authorize(s) any of the staff, employees, agents and representatives of iL.E.A.D. Success Tutoring and Mentoring to provide for, approve and authorize any health care at any hospital, emergency room, doctor's office or other institution, employ any physicians, dentists, nurses or other person whose services may be needed for such health care, review and if necessary disclose the contents of any medical records, execute any consent form required by medical, dental or other health authorities incident to the provision of medical, surgical, or dental care to the child. Health care shall include, but not be limited to the administration of anesthesia, x-ray, examination, performance of operations, diagnostic and other procedures.

The undersigned(s) hereby further authorize(s) emergency transportation by either day care personnel or if necessary by ambulance or other emergency vehicle.

If there is no medical emergency, iL.E.A.D. Success Tutoring and Mentoring staff will first use reasonable efforts to contact the parent(s) and /or guardian(s) before administering or authorizing any treatment.

Notwithstanding other provisions in this consent form, iL.E.A.D. Success Tutoring and Mentoring shall not have the authority to withhold or withdraw life-sustaining procedures for the child.

iL.E.A.D. Success Tutoring and Mentoring keeps the children consistently well supervised. However, accidents do happen. The undersigned(s) assume(s) all risk of injury or harm to the child associated with participation in tutoring and mentoring activities and agree(s) to release, indemnify, defend and forever discharge iL.E.A.D. Success Tutoring and Mentoring and it's staff, employees, and agents of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action in respect of death, injury, loss or damage to the child, or by the child, howsoever caused, arising or to arise by reason of or during the child's participation in the tutoring and mentoring activities.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date