

Little Lumineers Liability Waiver & Field Trip Permission

General Liability Waiver

I, the undersigned parent/guardian, understand that Little Lumineers Learning & Care will take every reasonable precaution to ensure the safety and well-being of my child.

However, I acknowledge and accept that in any group child care setting, there are inherent risks, including but not limited to:

- Minor injuries such as bumps, bruises, scratches, or falls
- Exposure to illnesses, despite hygiene and cleaning protocols
- Behavioral issues from other children, including hitting or biting
- Playground or outdoor-related risks (weather, insects, uneven ground)

I agree not to hold Little Lumineers, its owner, staff, or volunteers liable for any injuries or incidents that may occur during the course of normal childcare activities.

I also agree to keep my child home if they are experiencing symptoms of illness per the center's Health Policy.

Emergency Authorization

In the event of an emergency, I authorize Little Lumineers staff to administer first aid and to seek emergency medical treatment from licensed medical professionals.

I understand that every effort will be made to contact me or an emergency contact listed on my child's enrollment form prior to any treatment.

I release Little Lumineers from liability in acting on my behalf in such instances.

Field Trip Permission

I hereby give permission for my child to participate in off-site field trips with Little Lumineers Learning & Care. These trips may include, but are not limited to:

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- Jordan Park (splash pad & mini pool)
- Malibu Splash
- Chuck E. Cheese
- Bounce houses and similar recreational centers

Transportation will be provided in a private van with booster seats. All children will be supervised by Little Lumineers staff at all times.

I understand that participation is optional and care will still be provided at the home facility for children not attending a given outing.

By signing this form, I release Little Lumineers and its staff from any liability for accidents or injuries that may occur during transportation or activities related to field trips.

I also agree to notify the provider in writing if I choose to opt-out of any specific outing.

Acknowledgment & Signature

I have read and understood the terms outlined above. I accept the risks and give permission as indicated.

Parent/Guardian Name: _____

Signature: _____

Date: _____