



**UPMASA
PACIFIC NORTHWEST CHAPTER**

Non-Profit Organization EIN # 37-1099415
WA State Registration # 2002759
Oregon State Registration # 6112



Childcare Liability Waiver Form

Child's Name: _____ **Parent/Guardian Name:** _____

Address: _____ **Phone Number:** _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Acknowledgement of Risks: I acknowledge that there are inherent risks associated with childcare services, including but not limited to accidents, injuries, or illnesses that may occur despite reasonable precautions taken by UPMASA-PNW and HYATT REGENCY SEATTLE.

Release and Waiver of Liability: In consideration of my child being allowed to participate in childcare services provided by UPMASA-PNW, I hereby release and discharge UPMASA-PNW, HYATT REGENCY SEATTLE, their respective affiliates, officers, employees, and agents from any and all claims, liabilities, damages, or expenses (including attorney fees) arising from or related to any incident, injury, or harm that may occur to my child during the provision of childcare services, except where such incident, injury, or harm is caused by the gross negligence or willful misconduct of UPMASA-PNW and HYATT REGENCY SEATTLE.

Medical Authorization: I authorize UPMASA-PNW and HYATT REGENCY SEATTLE and its staff to seek medical treatment for my child in case of an emergency where I cannot be reached. I agree to be responsible for any costs incurred for medical treatment.

Photographs and Publicity: I consent to the use of photographs or videos taken of my child during childcare activities for promotional purposes by UPMASA-PNW and HYATT REGENCY SEATTLE, unless otherwise specified in writing.

Emergency Contact Information: I agree to provide accurate emergency contact information and any relevant medical information about my child that may assist in providing appropriate care.

Compliance with Rules: I understand that my child and I must comply with all rules and regulations established by UPMASA-PNW for the childcare services.

Agreement and Signature:

I, the undersigned parent or legal guardian of the above-named child, hereby acknowledge that I have read and understand the terms of this childcare liability waiver form. I voluntarily agree to its provisions and sign it of my own free will.

Parent/Guardian Signature: _____

Date: _____