## Kinmon Gakuen/Golden Gate Institute Waiver and Release of Liability

I, the undersigned, parent or legal guardian of	, a minor child,
hereby give permission for my child to participate language school activities conduct	ted by Kinmon Gakuen,
Golden Gate Institute, a non-profit California corporation (hereinafter referred to as t	the "School"). I
understand that the primary objective of the program is Japanese language education	(hereinafter referred to as
the "School Activities").	

I certify that my child is physically fit such that he/she is able to participate in School Activities and that I have read and understand any rules and safety provisions established for this program. Knowing this, and in consideration of being permitted to participate and/or receive instruction at School, I hereby voluntarily release the School from any and all liability resulting from or arising out of my participation and/or receipt of instruction in School. I understand and agree that I am releasing not only the School, but also the officers, agents, and employees of those entities. I understand and agree that this Waiver and Release of Liability will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I or my minor child may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me or my minor child, arising our of participation and/or receipt of instruction in School Activities.

I understand and agree that by signing this Waiver and Release of Liability, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me and/or my minor child while participating and/or receiving instruction in School Activities. I understand and agree that by signing this Waiver and Release of Liability, I am agreeing to release, indemnify, and hold harmless the School and its officers, agents and employees from any and all liability or costs, including attorney fees, associated with or arising from participation and/or receipt of instruction in School Activities. I understand that this Waiver and Release of Liability will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children, and any guardian ad litem for said children.

I acknowledge that I have read this Waiver and Release of Liability and that I understand the words and language in it. I also understand that this Waiver and Release of Liability is valid for the duration of time that my child participates in School Activities unless rescinded through my written instructions.

## Photo Release Permission Slip

As a parent or guardian of this student, I hereby consent to the use of
photographs/videotape taken during the course of the school year for publicity
promotional and/or educational purposes (including publications, presentation or
broadcast via newspaper, internet or other media sources). I do this with full
knowledge and consent and waive all claims for compensation for use, or for damages
Yes, I give consent for Golden Gate Institute, Kinmon Gakuen to photograph
my child for school purposes and/or at school events.
No, I do not authorize Golden Gate Institute, Kinmon Gakuen to photograph
for my child for any event.
Parent/Guardian Signature:
Student's Name:

Date: \_\_\_\_\_