

Release Form

I/We, as the parents/guardians of _____ (Student) do hereby give permission for the above/named child to attend art lessons by Sandy Reid at her studio located at 122 Avenida del Poniente, San Clemente, CA, and/or at Armstrong Studio located at 23011 Moulton Parkway, Building H, No5, Laguna Hills, CA or at other agreed upon locations. I/We for and on behalf of myself/ourselves, our invitees and of the Student, hereby release, waive and discharge Sandy Reid from all liability for any and all loss or damage, and any claim or demands therefore on account of injury to myself/ourselves, our invitees and/or the Student or property of myself/ourselves, or invitees and/or the Student which may arise out of or be related to any art/handwork instruction at 122 Avenida del Poniente, San Clemente, CA or other agreed upon location.

_____ (date) _____ (sign)

_____ (print name)

Sandy Reid

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San Clemente, CA