



**WATAUGA PUBLIC LIBRARY
HOMEWORK HELP CENTER
STUDENT CONSENT FORM**

The following child, _____, for whom I am responsible, has my permission to participate in the HOMEWORK HELP CENTER, a program which provides homework assistance to children in grades 1-6 at the Watauga Public Library. I know that this assistance is free and will be provided by volunteers at the Library. I understand that the Library staff offers limited assistance only.

The HOMEWORK HELP CENTER is open on Tuesdays, 3:45 - 5:45 p.m. and Thursdays, 5:30 - 7:30 p.m. I understand that my child must sign in when attending, and bring a homework assignment and any supplies needed to do the assignment in order to receive help in the Center. A daily progress report will be sent home with the child.

I understand no food, drink, or candy may be brought into the library.

While children are in the Center, they will be under the supervision of the Center Coordinator and the volunteers. Children are asked to leave the Center when assistance is no longer needed in order for the staff to be able to devote their time and attention to the remaining students. It is the parents' responsibility to pick up their children or provide transportation and supervision for them.

My child and I agree that the Library rules must be followed or he/she will be asked to go home for the day. I understand and agree that the Center is not a child care project or service. The Library is not responsible for children after they leave the Center. The Library assumes no responsibility for unattended children.

In consideration of the City of Watauga allowing my child to participate in the Center, I, and on behalf of my child, agree to release, discharge and relinquish the City of Watauga, its officials, employees, agents, and volunteer instructors from any and all claims, demands, and causes of action of every kind and character, INCLUDING THOSE BASED ON NEGLIGENCE, for any known or unknown, foreseen or unforeseen bodily or personal injuries, including those to my child or self, damage to property, theft or loss of property, arising from my child's participation in the Center.

In consideration of the City of Watauga allowing my child to participate in its Homework Help Center, I do hereby expressly stipulate and agree to indemnify, save and hold forever harmless the City of Watauga, its officials, agents, employees, or volunteer instructors, from any and all claims of any kind, INCLUDING A CLAIM BASED ON NEGLIGENCE, demands, or actions in law or equity that may be made on behalf of said minor, or the behalf of myself, whether such claim is made by myself, my child, my spouse or former spouse, or any of my heirs or representatives, or other third parties.

DATE

PARENT / GUARDIAN NAME (please print)

PARENT / GUARDIAN SIGNATURE

ADDRESS

CITY

ZIP

PHONE NUMBER

THE LANGUAGE WE SPEAK AT HOME

EMERGENCY CONTACT - please give a name & phone number in case of an emergency.

* * * * *

STUDENT NAME _____ **AGE** _____

SCHOOL _____ **GRADE** _____

MY CHILD WILL COME TO THE HOMEWORK HELP CENTER ON THE FOLLOWING DAY(S).

_____ **Tuesday**

_____ **Thursday**