

CHINESE CULTURAL & EDUCATIONAL ASSOCIATION – CHINESE LANGUAGE SCHOOL

GENERAL RULES AND GUIDELINES FOR PARENTS AND STUDENTS

Chinese Cultural & Educational Association-Chinese Language School (“CCEA”), located on the 2nd and 3rd floors of the property commonly known as 8141 N. Kedvale Avenue, Skokie, Illinois (the “Building”), conducts its activities on Saturday afternoons during the school year. St. Lambert Church, owner and lessor of the Building, has the sole and exclusive use and control of all other areas of the Building, where various community activities take place with participants unknown to CCEA. For the safety and welfare of our students, CCEA strongly discourages its students to wander beyond the 2nd and 3rd floors of the Building during school hours while attending CCEA activities, except as described herein. During school hours, we can only provide supervision in the students’ classrooms by our teachers and very light supervision in the hallways during recesses by our parent volunteers. There is no supervision beyond the 2nd and 3rd floors of the Building. The two recesses are intended for students to go to the restrooms and walk around in the hallways to stretch their legs. Any horseplay or leaving the 2nd and 3rd floors is not allowed. CCEA, its board members, officers, volunteers and teachers shall have no responsibility for any bodily injury sustained by a student or property damages caused by a student’s failure to comply with the rules described herein; all injury and damages related thereto shall be borne solely by the student (if 18 or older) or the student’s parents (if a minor). It is the parents’ responsibility to educate their children of the dangers lurking in our society. Parents have the sole responsibility to communicate to their children on the drop-off and pickup procedures. CCEA recommends that parents drop off and pick up their children to and from their classrooms. CCEA recommends and welcomes parents to discuss any concerns with the CCEA officers. By signing the release and consent below you acknowledge that you fully understand and agree, for yourself and on behalf of your minor child(ren), as applicable, to abide by the rules as set forth herein.

COMPLETE AND GENERAL RELEASE AND CONSENT

I, the undersigned, acknowledge that I voluntarily register myself and/or each member of my family listed below to participate in the activities sponsored by CCEA. I acknowledge and understand that unforeseen injuries or accidents may arise in the course of these activities/programs. I also acknowledge and understand that school officials cannot control the conditions present at the location(s) where CCEA activities are conducted. I further acknowledge and understand that CCEA cannot and does not assume any responsibility for the safety and welfare of the students outside the timeframe and/or permitted areas where CCEA activities take place, as set forth in the General Rules and Guidelines for Parents and Students (above). My signature below constitutes evidence of my full understanding of the CCEA General Rules and Guidelines for Parents and Students. In consideration for CCEA allowing me and/or my child(ren) to participate in CCEA school activities, for myself and my children I do hereby: 1) accept full responsibility and liability for the participation of myself and/or each member of my family in CCEA school activities and 2) release, discharge, covenant not to sue, and INDEMNIFY, HOLD HARMLESS AND DEFEND CCEA, its board members, officers, volunteers and teachers, from all claims, actions, liability, loss, damages, suits, fees, costs, expenses, medical expenses or attorneys’ fees, arising from or out of my or any member of my family’s attendance or participation in CCEA sponsored activities.

Student Name (Please print name clearly)

Sign: _____ Date: ___/___/___
Student Signature (if 18 or older)

Student Name (Please print name clearly)

Sign: _____ Date: ___/___/___
Student Signature (if 18 or older)

Student Name (Please print name clearly)

Student Name (Please print name clearly)

Student Name (Please print name clearly)

Parent or Guardian Name (if minor student(s))
(Please print your name clearly)

Sign: _____ Date: ___/___/___
Parent or Guardian Signature (if minor student(s))

1) **Authorization and Consent for Medical Treatment:** In the event of an emergency, I, the undersigned, authorize CCEA officials to act on my behalf and in my stead, to arrange immediate medical treatment for myself and/or my family member(s) from a licensed or certified physician and/or to call emergency 911, as CCEA officials deem necessary or appropriate. I hereby assume sole responsibility for, and agree to pay or to dispute at my own expense, any and all expenses, costs, and liabilities arising therefrom, and hereby agree to DEFEND, INDEMNIFY AND HOLD HARMLESS CCEA, its board members, officers, volunteers and teachers, from all claims, actions, liability, loss, damages, suits, fees, costs, expenses, medical expenses or attorneys' fees, arising from or out of any such immediate or emergency medical treatment

2) **Emergency contact for myself and/or my family member(s)** during school hours on Saturdays are as follows:

Primary:

Name and Relationship

(_____) _____
Telephone

Secondary:

Name and Relationship

(_____) _____
Telephone

3) **Release of Pictures and Video:** CCEA will have pictures and a video taken throughout the school year for its Chinese New Year celebration yearbook publication and video tape. CCEA would like to obtain your consent to release these pictures and video. **Your consent is optional.** However, please be advised that if you withhold your consent, your family will not be able to participate in the Chinese New Year Performance as we cannot separate your family members from the rest of the performers.

I agree to give my consent to release the pictures, video and audio of my family, and for myself and my minor children, I hereby release CCEA, its board members, officers, volunteers and teachers, from all claims, actions, liability, loss, damages, suits, fees, costs, and expenses, resulting from the use or release of such pictures, video or audio..

I do not agree to give my consent to release the pictures and video of my family.

Student Name (Please print name clearly)

Sign: _____ Date: ___/___/___
Student Signature (if 18 or older)

Student Name (Please print name clearly)

Sign: _____ Date: ___/___/___
Student Signature (if 18 or older)

Student Name (Please print name clearly)

Student Name (Please print name clearly)

Student Name (Please print name clearly)

Parent or Guardian Name (if minor student(s))
(Please print your name clearly)

Sign: _____ Date: ___/___/___
Parent or Guardian Signature (if minor student(s))