



PINNGUAQ

**Pinnguaq Makerspace – RELEASE FROM PARENTAL PICK-UP**

**TO BE SIGNED BY A PARENT OR LEGAL GUARDIAN ONLY.**

**Please read this document carefully before signing where indicated. Your signature confirms that you have read and accepted the terms of this Release and that you understand that you may be waiving legal rights.**

Someone will be picking my child up from the Pinnguaq Makerspace. Please circle one that applies

YES NO

If you answered Yes: Each day a parent or designated adult must sign your child out from the Maker Space. Please provide a name and contact number for who will be picking-up your child from the Maker Space?

1)

2)

3)

**If you answered no to the above question.**

In consideration of the acceptance of my request for my child to be dismissed on his/her own (no parent/guardian or designate present) each day from any planned activity or drop-in programming at the Pinnguaq Makerspace, I hereby release, waive, and discharge the Pinnguaq Association, and its officers, directors, employees and volunteers, of and from all claims, demands, damages, costs, actions and causes of action, in respect to death, injury or damage, to my child's person or property, in any way arising from my child's signing out of any activities at the Pinnguaq Makerspace.

Child's Name (printed): \_\_\_\_\_

Parent/Guardian Name (printed): \_\_\_\_\_

Parent/Guardian Signature:

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Parent's Cell or Home Phone  
Number

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Date:

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