

WINDSOR LEARNING CENTER

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Director

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Christopher D. Lynch, Ph.D.
Director

Dear Parents/Guardians,

We would like to offer your son/daughter the opportunity to attend a 40 minute PAWS session. Experienced, volunteer pet handlers bring dogs to our school throughout the year and teach very small groups of students how to properly approach and interact with them.

Please read and sign this waiver if you would like your child to participate in PAWS. **Please note that your child must be on level 3 in order to participate in this special activity.**

General Release and Waiver for PAWS

I, _____, being the parent or legal guardian of _____, hereby give permission for my child to attend "PAWS" at Windsor Schools. I understand and agree that while attending this program, my child will be held responsible for complying with the rules and regulations of Windsor Schools. In addition, I understand that my child will be interacting with dogs under the supervision of volunteer pet handlers and a Windsor Schools staff member. **Further, I confirm that my child is not allergic to pets.**

I hereby waive and release any and all claims, suits, causes of action against Windsor Schools and the volunteer pet handlers, their officers, agents, employees and servants, arising from my child attending this class.

I acknowledge that I execute this document of my own free will, and without being under any duress or coercion. I further acknowledge that I am signing this document willingly, and, if I have any reservations concerning the release of the aforementioned claims, I have the option of not allowing my son/daughter to attend the PAWS program.

Parent/Guardian Name

Parent/Guardian Signature

Date