



2022-2023 Permission to Release to After School Care Program

I request that my child(ren) be released to the after-school care program identified below. I give my permission for them to be picked up and transported by the program personnel in an after school care program vehicle. I understand that the after school care program vehicles will pick up on normal school days by 3:30 pm in the front parking lot. If there are any changes in these arrangements, I will notify my child's teacher and the school office.

In consideration for the granting of my request, I hereby release, discharge and hold harmless Holy Family Catholic School and/or Catholic Diocese of Austin, together with their employees, representatives, and volunteers (collectively "Holy Family") from any and all claims, causes of action, liabilities and/or attorney's fees arising from the release of my child(ren) in accordance with my request. I further release, discharge and hold harmless Holy Family from any and all obligations and/or duties they have, if any, to my child(ren) once my child(ren) are released in accordance with my request. Check all that apply.

Please check all that apply

____ **Lord of Life**
9700 Neenah Ave.
Austin, TX 78717
(512) 921-0644

____ **Stepping Stone XII**
7700 W. Parmer Ln.
Austin, TX 78729
(512) 336-5237

____ **LeafSpring**
11651 W. Parmer Ln.
Cedar Park, TX 78613
(512) 260-9700

____ **Children's Learning**
1920 S. Lakeline Blvd.
Cedar Park, TX 78713
(512) 692-6236

____ **Kids r-Kids**
1511 Avery Ranch Blvd.
Austin, TX 78717
(512) 218-9669

____ **Creme de la Creme**
11801 West Parmer Ln.
Cedar Park, TX 78713
(737) 207-8866

____ **Other** (List details – same as above)

Start date: _____

____ Full Time ____ Part Time – Days in the week the child will attend: _____

____ Drop In / As Needed Notes: _____

Signature of Parent or Legal Guardian

Name(s) of my children: ****PLEASE PRINT****

Date

Grade _____

Grade _____

Grade _____