



TUTORING BEYOND BORDERS®

STUDENT CONSENT FORM

This is a Release of Liability, Waiver of All Possible Claims and Assumption of Risks, made by me, the undersigned Releasor, on my own behalf, or on behalf of my child (if Releasor is under 18 years of age), to Tutoring Beyond Borders for participating in tutoring sessions (either in-person or online) offered by this organization. I hereby agree as follows:

- To waive any and all claims that I have or may, in the future, have against Tutoring Beyond Borders, its directors, officers, members, tutors, and representatives (all of whom are hereinafter collectively referred to as the Releasees)
- To release the Releasees from any and all liability for any loss, damage, injury, or expense that I may suffer, or that my next of kin may suffer as a result of my participation in this tutoring program, due to any cause whatsoever, including negligence
- All decisions made by me are my own, and the Releasees will not be responsible for any resulting consequences
- To hold harmless and indemnify the Releasees from any and all liability for any consequences that may result from my reliance on information given through the tutoring service (any reliance I place on such information is therefore at my own risk)
- This agreement shall be binding upon my heirs, next of kin, executors, administrators, assigns, and representatives.
- In entering into this agreement, I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this agreement.
- I freely accept and fully assume all risks, dangers, and hazards and the possibility of personal injury, death, property damage or loss, resulting from my participation in this tutoring program.
- I agree to abide by the tutoring policies listed on Tutoring Beyond Borders' website. I understand that program policies are subject to change at Tutoring Beyond Borders' discretion, and I understand that if I do not abide by these policies, this may result in the disqualification and removal of my participation in the tutoring program.

I HAVE READ AND UNDERSTAND THIS WAIVER AND RELEASE, AND I AM AWARE THAT BY SIGNING THE SAME I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

SIGNED ON THIS DATE: _____ / _____ / _____

Student/Releasor Name (Print)

Student/Releasor Signature

Parent/Legal Guardian Name (Print)
(if student is a minor)

Parent/Legal Guardian Signature
(if student is a minor)



Phone:
519-577-4822
Hours:
10:00 AM - 6:00 PM



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