



PARENTS CONSENT FORM

TO WHOM IT MAY CONCERN:

This is to permit my son/ daughter _____
(Name)
in _____ to be held at _____
(Event) (Place)
on _____ .
(Date)

We will not hold the **UNIVERSITY OF CEBU** responsible for any untoward incident that may happen beyond their control.

Name & Parents Consent

Name & Signature of Instructor/Adviser

Noted by:

MR. PEDRO O. QUIÑAL JR.,LPT,MST-ELL
Student Affairs Office Coordinator

Approved by:

DR. YOLANDA C. SAYSON
Vice Chancellor for Academic Affairs

QUIT CLAIM & RELEASE

KNOW ALL MEN BY THESE PRESENTS:

We, the undersigned parents of _____
Filipino, of legal age and residents of _____
Philippines, have been informed by the University of Cebu and our said son/daughter, that
he/she and his/her batch of _____ students from University of Cebu have
voluntarily organized an activity in _____ area this coming _____;
that the expenses shall be shouldered by us and/or our child that is our child's personal and
primary responsibility to exercise all the necessary diligence in safeguarding himself/herself
from any harm, risks, dangers and accidents while on the way to, from, during all the phases
of the said activity; that the University of Cebu and its officers and personnel will not be
accountable for any untoward harm, injury, accident or incident that may happen to our
child during his/her participation in this activity. We are aware and conscious of this risk and
benefits involved in the students planned activity, and we have given our consent for our
child's participation in this activity.

In view thereof, we hereby waive any and all actions or causes of actions, damages and
claims that were our heir might, may or shall have against said University of Cebu and its
officers and personnel by reason of the happening and consequences of any such
aforementioned incidents, and forever release and discharge the University of Cebu and all
its officer and personnel from any other all liabilities, obligations and responsibilities arising
from any harm, injury, accident or incident that may happen to our child in connection with
his/her participation in this activity.

IN WITNESS WHEREOF, we have affixed our signatures this _____ day of
_____ at _____, Philippines.

Name & Signature of Parent
CTC No. _____ issued on
_____ at _____

Name & Signature of Parent
CTC No. _____ issued on
_____ at _____

SIGNED IN THE PRESENCE OF:

NOTARIAL ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES }
CITY OF CEBU } S.S

BEFORE ME, a NOTARY PUBLIC for and in the City of Cebu, Philippines, this _____, personally appeared _____, with their Community Tax Certificate as per data indicated above; all known to me and to me known to be the same persons named in and to me known to be the same persons who executed the foregoing instrument and acknowledged to me that the same is their free and voluntary act and deed.

WITNESS MY HAND AND NOTARIAL SEAL this _____ at Cebu City, Philippines.

Doc. No. : _____
Page No. : _____
Book No. : _____
Series of : _____

REPUBLIC OF THE PHILIPPINES }
CITY OF CEBU } S.S

AFFIDAVIT

KNOWN ALL MEN BY THESE PRESENTS:

I, the Undersigned student of _____ of the University of Cebu, Filipino, of legal age, single and a resident of _____, Philippines, after having been duly sworn to in accordance with law, depose and say:

1. That I freely and voluntarily decide to participate in an _____ (Name of Activity) at _____ organized by my batch of _____ students to be held on the month of _____;
(day) (year)
2. That I undertake to follow and obey the instructions and directives of the instructors whom we, the participants, have invited to assist us during the said activity;
3. That I agree and understand that it is my personal and primary responsibility to exercise the necessary diligence in safeguarding myself from any harm, risks, dangers and accidents while on the way to, from, during and all the phases of the said activity;
4. That I agree and understand that the University of Cebu and its officers and personnel will not be accountable for any untoward harm, injury or accident that may happen to me during my participation in this activity; hence I hereby waive any and all actions or causes of action, damages and claims that I, or my heirs might have or shall against said University of Cebu and its officers and personnel by reason of the happening and consequences of any such aforementioned incidents, and release and discharge the University of Cebu, all its officers and personnel from any liabilities, obligations and responsibilities arising from any harm, injury or incident that may happen to me during my participation in this activity;

That I execute this affidavit to attest to the veracity of all foregoing and for whatever legal purposes this may serve.

IN WITNESS WHEREOF, we have affixed our signatures this _____ day of _____, in Cebu City, Philippines.

Name & Signature of Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____ at Cebu City, Philippines, affiant exhibited to me his/her Community Tax Certificate No. _____ issued on _____ at _____.

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Series of : _____