

## **WAIVER**

I am allowing my son/daughter,	NEOZEL S. OBLEPIAS
to participate at the CIT Ground Cleaning for	or the preparation of the limited
face to face.	
I understand that the authorities	of the university exercise the
necessary safety precautions in this activity.	
Turn and and the second the secon	inad forms that about a stiriture. T
In consideration of the benefits deri	•
expressly waive any and all claims against the	•
this college on account of any unforese	
son/daughter might incur in connection with	•
assured that the University will also take the	e necessary actions and facilitate
in case of emergency.	
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Explipace EVELYNS OBLEDIAS	SEPTEMBER 2, 2022
Signature over printer name of Parents/Guardian	Date
MEOZEL S. OPLEDIAS	CENTEMPER 2 2022
NEOZEL S. ÓBLEPIAS Signature over printer name of Student	SEPTEMBER 2, 2022 Date
Received by:	
Date:	