

匹兹堡中文學校

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- 本人理解并承认我的子女或由我行使监护权的未成年人（以下称“学生”）进入中文学校或参与中文学校的课程或活动可能涉及的已知或未知的风险。本人愿意为自己及学生承担一切风险与后果，包括在中文学校期间发生患病、事故、受伤、医疗紧急情况或财产损害的风险与后果。

- 本人理解并承认中文学校已经为降低风险做出了最大努力。本人代表自己、学生、我的继承人、继任人、受让人、个人代表和近亲免除中文学校、中文学校董事会成员、中文学校行政管理人员、中文学校教师及其他员工或代理人、中文学校校园所在的中学或其他地点及相关学区因为其任何行为或不作为导致了学生或本人的患病、事故、受伤、医疗紧急情况或任何性质的财产损害而引起的诉讼请求、责任、索赔和费用。本人同意赔偿因为我或者我的代理人就学生或本人的患病、事故、受伤、医疗紧急情况或任何性质的财产损害对中文学校、中文学校董事会成员、中文学校行政管理人员、中文学校教师及其他员工或代理人、中文学校校园所在的中学或其他地点及相关学区提起的诉讼请求、责任、索赔和费用。

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匹茲堡中文學校



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- 本人理解并愿意遵守中文学校制订的所有规则、安全要求、及尊重人身、财产和良好行为的一般标准。如果学生或本人违反中文学校制订的任何规则、安全要求或尊重人身、财产和良好行为的一般标准，本人同意赔偿中文学校、中文学校董事会成员、中文学校行政管理人员、中文学校教师及其他员工或代理人、中文学校校园所在的中学及相关学区因此遭受的诉讼请求、责任、索赔或费用。

- 本人已阅读、完全理解并且同意此文件中所有条款，除文内所述，并无其他诱导或保证。

匹茲堡中文學校



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Waiver of Liability

As a consideration for a student's enrollment of classes or participation in activities of Pittsburgh Chinese School (hereinafter "PCS"), parents or guardians of the student (hereinafter "I") must acknowledge and agree to all terms and conditions of this document.

- I understand and acknowledge known or unknown risks related to the presence or participation in PCS classes or school activities of my child(ren) or minors to whom I am a parent/guardian (hereinafter "Student"). I voluntarily assume all risks and any potential consequences resulting from the Student's or my presence or participation in PCS, including risk of illness, accidents, injuries, medical emergency or damages during the Student's or my presence or participation in PCS.
- I understand and acknowledge that PCS has made its best effort to reduce risks. I, on behalf of myself, the Student, my heirs, successors, assigns, representatives and next of kin, hereby release, waive, discharge, and hold harmless PCS, PCS Board of Directors, PCS administrative personnel, PCS teachers and other staff or agents, the high school or any other location from which PCS leases its campus, and the relevant school district from any and all claims, liabilities, damages, costs and expenses arising out of their action or omission which causes the Student or me illness, accidents, injury, medical emergency or damages in any way connected with the Student's or my presence or participation in PCS. I agree to indemnify PCS, PCS Board of Directors, PCS administrative personnel, PCS teachers and other staff or agents, the high school or any other location from which PCS leases its campus, and the relevant school district from any and all claims, liabilities, damages, costs and expenses brought by me or anyone acting on my behalf for the Student's or my illness, accidents, injury, medical emergency or damages in any way connected with the Student's or my presence or participation in PCS.
- If an illness, injury or medical emergency occurs to the Student or me during the Student's or my presence or participation in PCS, PCS has my express permission to administrator or to authorize the administration of urgent or emergency care, including the transportation of the Student or me to an urgent care or emergency care provider. I understand and acknowledge that in such circumstances, notice to me or an emergency contact of the injury or medical emergency may be delayed. Therefore, any urgent or emergency care provider has my express authority to conduct isolation/quarantine, diagnostic or anesthetic procedures, or to provide medical care or treatment, as they may deem reasonable or necessary under all existing circumstances. All costs and expenses associated with such care are solely my responsibility. I, on behalf of myself, the Student, my heirs, successors, assigns, representatives and next of kin, hereby release and discharge PCS, PCS Board of Directors, PCS administrative personnel, PCS teachers and other staff or agents, the high school or any other location from which PCS leases its campus, and the relevant school district from any and all claims, liabilities, damages, costs and expenses arising out of their rendering or failing to render any type of emergency or medical services. If the Student or I am discovered to have infectious disease(s) or exhibit suspect symptoms of

匹茲堡中文學校



PCS Educational Foundation, Inc.

infectious disease(s), I hereby expressly authorize PCS to notify federal, state, local public health agencies or other relevant government agencies.

- I understand and agree to comply with PCS rules and safety requirements, as well as general standards for respect of persons and property and good behavior. I agree to indemnify PCS, PCS Board of Directors, PCS administrative personnel, PCS teachers and other staff or agents from any and all claims, liabilities, damages, costs or expenses arising out of the Student's or my failure to comply with any PCS rules, safety requirements, or general standards for respect of persons and property and good behavior.
- I have read, fully understood and agreed to all provisions in this document without inducement or assurance beyond what is stated herein.