

WAIVER AND RELEASE OF LIABILITY

(FOR PARENTS WHO REQUEST THAT THEIR CHILD BE ACCOMODATED IN CAMPUS DORMITORY HOUSING DURING THE COVID-19 PANDEMIC)

I, _____, of legal age, single/married, with address
at _____, depose and state that:

1. I am the parent of _____, a student of Silliman
University;

2. I acknowledge that classes in Silliman University for the 1st semester of school year 2023-

10. It is understood that this V
admission of liability by Silliman
denied.

