

EXHIBIT D

CLIENT WAIVER

Each of the undersigned is a parent/legal guardian of _____, a child who is being enrolled for day care services at the _____ Child Care Center (the "Center"). I/we understand that the Center is solely responsible for its operations, its staff, and for the building, furniture, grounds and equipment that make up the Center. I/we also understand that Lansdale Hospital Corporation (Lansdale Hospital) is not responsible for the Center's operations, its staff, or for maintenance of its building, furniture, grounds or equipment.

I/we waive any claims against Lansdale Hospital Corporation (Lansdale Hospital) for any injury to person or damage to property that may in any way arise out of my/our child's participation in the Center's programs, including without limitation, any injury or damage that may occur during drop off and pick up of my/our child on property outside of the Center's property. I/we sign this waiver freely and without duress.

Relationship to child: _____

Date: _____

Relationship to child: _____

Date: _____