

DISCLAIMER AND WAIVER OF LIABILITY

ALL IN 1 S.P.O.T. WITH THERATALK, SLP, OT, PT, PLLC

It is agreed that in consideration for the services being rendered to _____, which are being provided at the request of _____'s parents or legal guardians signing below, that except as provided in this Agreement, in no event shall either party be liable for any special, indirect, incidental, or consequential damages, whether arising under warranty, contract, negligence, strict liability, indemnification, or any other cause or combination of causes whatsoever.

This limitation shall apply notwithstanding any failure of essential purpose of any limited remedy.

Understanding the intent and meaning of the foregoing, the undersigned consent and agree to the services provided by the entities named at the top of this Agreement and except for gross negligence or willful or intentional misconduct, the undersigned waive all liabilities against the said two entities and accept the disclaimer by these said two entities for any liabilities except as specifically provided for herein.

ALL IN 1 S.P.O.T. WITH
THERATALK, SLP, OT, PT, PLLC

Patient Signature

Parent or lawful guardian signature

Date _____