

Cancellation Policy

We understand that schedules may change requiring you to cancel your registration.

Our cancellation policy is:

- No refund will be given for cancellation within two weeks prior to the start of each program.
- If you cancel your enrollment at fourteen days prior to the start of each program, you are eligible for the following refund:
 - Weekly Full Day Camp: Your payment minus \$100 per camp
 - Weekly Half Day camp: your payment minus \$50 per camp
 - Daily Camp: non-refundable
 - or -
 - Full amount credited to your account
- If cancellation is due to COVID-19 related disruptions:
 - Full amount will be credited toward your account
 - Credit can be applied to any program and any registered student
 - Credits have no expiration date
- There are no refunds for absences or no-shows
- You may request a full credit or refund for medical reasons with doctor's explanation

Late Pick Up Policy

Please be advised of the start and end times for each registered session (Before and After School Programs, Seasonal Camps, Day Camps, Tutoring reservations etc.) and call ahead if you are running late. We will give a grace period of 5 minutes after a program or session ends, afterwards you will be charged at the hourly rate (\$25.00 per hour).

Student Liability Waiver and Release Form

In participation in Stemtree Programs, I release from all liability and promise not to sue Kingdom Kids LLC d/b/a Stemtree of Lake Ridge, their employees, contractors, officers, directors, volunteers and agents (collectively "Program") from any and all claims, including claims of the Stemtree Program's negligence, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Program, including travel to, from, and during the Program.

I am voluntarily participating in the Program. I am aware of the risks associated with traveling to/from and participating in this Program, which include but are not limited to

physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, negligence; or conditions related to travel. Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Program, including travel to, from and during the Program.

I agree to hold the Stemtreet Program harmless from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Program, including travel to, from and during the Program. If the Program incurs any of these types of expenses, I agree to reimbursement. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance. I am 18 years or older. I understand the legal consequences of signing this document, including (a) releasing the Program from all liability, (b) promising not to sue the Program, (c) and assuming all risks of participating in the Program, including travel to, from and during the Program.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of Virginia. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms. I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made by or to me.

By signing this electronic waiver, I acknowledge that I have read, understand and agree to these terms.