

Garfield School District RE-2 (“School District”)

Activity Waiver, Release of Claims, and Parent Consent

ACTIVITY: Middle School activities and athletic practices, competitions, and events.

The above Activity will or may entail inherent risks and hazards including, but not necessarily limited to:

- Injuries that range from soreness and minor sprains to more serious conditions such as fractures, concussions, and death.

PARENT’S PERMISSION:

I, the undersigned parent or legal guardian (“Parent”) of the following named minor child:

_____ (“Student”), hereby give permission for the Student to participate in the Activity, despite the hazards listed above.

PARENT’S AND STUDENT’S REPRESENTATIONS:

In consideration of permitting the Student to participate in the Activity, and as an express inducement therefore, the Parent and Student hereby state, affirm, and agree to the following:

- a. The Student’s participation in the Activity is appropriate for the stage of Student’s development. Student is in good health and condition and has no illness, condition, or impairment that would make it extraordinarily unsafe for Student to participate in the Activity.
- b. Parent and Student understand that the Activity is or can be inherently dangerous and unpredictable, and that serious injuries or even death can occur even to experienced participants.
- c. Parent and the Student shall ensure that the Student shall at all times observe and practice proper techniques, methods, and precautions to ensure Student’s safety to the greatest possible extent while participating in the Activity.
- d. Parent and Student understand and agree that Student’s participation in the Activity shall be at the Student’s sole risk, and that the School District expressly disclaims any representation or undertaking that the Activity is safe for the Student, and further disclaims any and all liability or responsibility for any injury, harm, or damage that may occur from or in connection with the Student’s participation in the Activity.
- e. Parent affirms that they are aware of the kinds of risks the Student will face in the Activity, and states expressly that they have made a parental decision to assume such risks and understands the School District has relied upon this assumption of risk in permitting the student to participate in the Activity.
- f. Parent shall maintain and keep in force at Parent’s sole cost insurance coverage sufficient to compensate the Student and the Parent for the reasonably foreseeable costs and damages that could arise from or in connection with any and all personal injuries in connection with the Activity. Said insurance coverage shall be obtained prior to the Student’s beginning participation in the Activity and shall be kept and maintained in full force and effect during the entire term of such participation at the expense of the Parent. Parent consents for Student to receive immediate medical care and treatment for any injury or sickness resulting from the Activity.

WAIVER AND RELEASE OF CLAIMS:

Parent and Student hereby waive any and all claims and demands for relief, whether past or future and regardless of the legal or factual bases thereof, that could be asserted in any forum or manner whatsoever, based upon, related to, or concerning the Student’s participation in the Activity, expressly including but not limited to any claim for property damage, bodily injury, other personal injury, wrongful death, or similar claim, and expressly release, discharge, indemnify and hold harmless the School District, its Board of Education, agents and employees, past, present, and future, from and against any and all such claims and demands regardless when or by whom asserted. Notwithstanding the foregoing, this waiver and release of claims does not waive or release claims based upon a willful and wanton act or omission, a reckless act or omission, or a grossly negligent act or omission.

I certify and understand that I and my student are accountable for the contents of the Garfield School District Re-2 and Rifle Middle School Activities Handbook and agree to abide by its contents.

Printed Parent Name

Signature

Date

Emergency Medical Release Form

Student printed name

The undersigned parent/legal guardian hereby grants permission to the Garfield School District Re-2 and their duly authorized representatives to consent to first aid, emergency medical care and all other medical or surgical care they deem reasonably necessary to the health and wellbeing of my child. Also, when necessary for executing such care, I grant permission for hospitalization at an accredited medical facility.

Parent/Guardian printed name

Parent/Guardian signature

Date

Home Address: _____

Phone: _____

Employer: _____

Phone: _____

Family Physician: _____

Phone: _____

Chronic illnesses, allergies, etc: _____

Current medications: _____

Additional adult contact: _____

Phone: _____

Health/Accident Insurance Information

I fully understand that Garfield School District Re-2 **does not** provide accident or health insurance coverage for my child while he/she is participating in interscholastic athletics or extracurricular activities. However, such insurance is made available by the school district through an authorized agent. I further understand that it is my responsibility to provide accident insurance coverage for my child.

This statement releases Garfield School District Re-2 of financial responsibility in case of accident/injury to my child while he/she is participating in interscholastic activities and/or extracurricular activities.

Parent/Guardian Signature: _____ Date: _____

Medical Insurance Company: _____ Policy #: _____

Name of Insured:

Health/Accident Insurance Waiver

My child is not insured, I elect him/her not to be insured, and I am assuming the risks of injury to my child named above and shall absolve Garfield School District Re-2 and staff members of any and all financial responsibility for injuries occurring while participating in interscholastic activities.

Parent/Guardian Signature