

DANGEROUS ACTIVITY CONSENT FORM

The undersigned in my capacity as parent and/or legal guardian of _____
hereby provides consent for my child to participate in _____ .
I understand that participation in this event is inherently dangerous and that injuries are possible.

I agree to Hold Harmless and Indemnify the Woodridge Local School District and all of their employees from any and all liability including, but not limited to, liability for any injuries or damages sustained by _____ , or myself, as a result of participating in _____
_____.

I have reviewed the rules of the activities and agree that the subject of this release will abide them.

Student Name: _____

Parent/Guardian Name (Please Print): _____

Parent /Guardian Signature: _____

Date: _____

Address/City/Zip: _____

(W) Phone #: _____ (H) Phone #: _____