

ATHLETICS PARENTAL CONSENT
RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

YEAR _____

_____ Fall _____ Winter _____ Spring

We the undersigned father and mother or guardians(s) of _____

a minor, do hereby consent to his/her participation in voluntary athletic programs and do forever RELEASE, acquit, discharge and covenant to hold harmless the Upper Cape Cod Regional Vocational Technical School District, a municipal corporation of the state of Massachusetts, and its successors, departments, officers, employees, servants and agents, of and from any and all actions, causes of actions, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way of growing out of, directly or indirectly, all known and unknown personal said minor, and also all claims of right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in the Upper Cape Cod Regional Technical School's Physical Education Department's athletic programs; FURTHERMORE, we/I hereby agree to protect the Upper Cape Cod Regional Vocational School District and its successors, departments, officers, employees, servants, and agents against any claims for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in the Upper Cape Cod Regional Technical School's Physical Education Department's voluntary athletic programs, and to INDEMNIFY, reimburse or make good to the Upper Cape Cod Regional Vocational School District or its successors, departments, officers, employees, servants and agents any loss or damages or costs, including attorney's fees, the town or its representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent, or reckless acts or omissions while participating in said programs.

School _____ Sport _____

Signature(s) of Parents (s) or Guardian(s)	Date	Relationship
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Signature of Student

This form may not be altered.

COMPLETE REVERSE SIDE

