

Independent Study - Physical Education**RELEASE OF LIABILITY AND WAIVER OF CLAIMS
PRIVATE INSTRUCTION IN PHYSICAL EDUCATION****Student Name:**

I, having legal custody and educational decision making rights for _____,
do hereby grant permission for the student listed above to participate in private instruction in
physical education as described in the student's ISPE Individual Plan and ISPE Contract.

I understand that this program is not conducted by, or supervised by, any employee, agent or
representative of the Laguna Beach Unified School District, nor shall any materials be made
available to the student to facilitate their completion if the student's ISPE Individual Plan.

I hereby waive all claims against the District, it's agents or representatives, the County of
Orange, and the State of California for injury, accident, illness, or death occurring during, or by
reason of, this voluntary private physical activity, while in transit to this activity, or which may
occur during the time period in which the student is assigned the class period of ISPE

Signature of Parent/Guardian: _____ Date: _____

*Laguna Beach Unified School District Policy prohibits any person from participating in Private
Instruction in Physical Education without proper completion and execution of this Contract.
Failure to meet these terms may result in forfeiture of the privilege of the program.*

Please Retain a Copy for Your Records