



Buchser Middle School

"Home of the Bobcats"



RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AFTER-SCHOOL SPORTS PROGRAM

_____, has my permission to participate in the After School Sports program at Buchser Middle school. In consideration to the acceptance of my application for participation in this activity, I hereby WAIVE, RELEASE AND DISCHARGE any and all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue to me as a result of my participation in this activity. This release is intended to discharge in advance the Santa Clara Unified School District, Buchser Middle School, and its employees from and against any and all liability arising out or connected in any way with my participation in said activity, even though that liability may arise out of NEGLIGENCE or CARELESSNESS on the part of the persons or entity mentioned above.

I recognize that there are certain risks inherent in the activity I am seeking to participate in. Nevertheless, I voluntarily agree to ASSUME ANY AND ALL RISKS of injury or death from whatever cause inherent in or arising from my participation in this activity, whether such risks are known or unknown to me, and to release, discharge, hold harmless and indemnify all of the persons and the entity mentioned above who, through negligence or carelessness, might otherwise be liable to me or my heirs, personal representative, next of kin, spouse or assigns.

I have carefully read this agreement and fully understand its content.

In case of an accident arising out of the above-named activity, medical assistance may be administered to the above named participant. Permission slip will act as a medical release.

PRINT PARTICIPANTS NAME _____ DATE _____

PARTICIPANT SIGNATURE _____

PRINT PARENT/LEGAL GUARDIAN NAME _____

PARENT/LEGAL GUARDIAN SIGNATURE _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE # _____ WORK PHONE # _____

EMERGENCY PHONE # _____ HOSPITAL _____

GRADE _____ AGE _____

TRANSPORTATION INFORMATION

How will your son/daughter be leaving the After school Sports Program.
Walk _____ Bike _____ City Bus _____ Parent _____ Other _____

If participant must leave early, is he/she allowed to leave on his/her own? Yes ___ No ___