



Manteca Unified School District

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT FOR INTERSCHOLASTIC ATHLETIC AND/OR EXTRACURRICULAR ACTIVITIES PARTICIPATION

From: June _____ **To: June** _____

This is a release of liability and assumption of risk agreement. Read it carefully and sign below.

Completion of this release is a prerequisite to participation in any interscholastic athletic and/or extracurricular activity. This release essentially says that my son/daughter _____ (name of student) is physically fit and is going to voluntarily participate in a high school interscholastic athletic and/or extracurricular activity. We know and fully understand that any interscholastic athletic and/or extracurricular activity involves numerous risks, dangers and hazards, both known and unknown, where serious accidents can occur, participants can sustain physical injuries, damage to their property, and even suffer fatal injury. If he/she is hurt, injured or suffers a fatal injury, we (i.e, the student, parents and heirs) will not make a claim against or sue the Manteca Unified School District (hereinafter MUSD), its trustees, officers, employees and agents, or except them to be responsible or pay for any damages.

In consideration for MUSD allowing the students to participate in this interscholastic athletic and/or extracurricular activity, we voluntarily agree to release, waive, discharge and hold harmless MUSD and their trustees, officers, employees and agents from any and all claims of liability arising out of their negligence, or any other act or omission which causes the students illness, injury, death, and damages of any nature in any way connected with student's participation in this activity.

WE, THE UNDERSIGNED HAVE READ THIS DOCUMENT. WE UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS. WE FURTHER UNDERSTAND THAT WE ARE ASSUMING ALL RISK INHERENT IN THIS INTERSCHOLASTIC ATHLETIC AND/OR EXTRACURRICULAR ACTIVITY. WE VOLUNTARILY SIGN OUR NAME AS EVIDENCE OF OUR ACCEPTANCE OF THE ABOVE PROVISIONS.

Signature of Student/Participant

Date

Signature of Parent or Legal Guardian

Date

Phone #