

Marietta City Schools

SCHOOL ACTIVITIES CONSENT FORM

This is to certify that my child, _____,
a student at _____ school, has my permission to
participate in the following organized, school-sponsored activity/activities.

<i>ACTIVITY</i>	<i>DATE</i>	<i>TRANSPORTATION</i>

I acknowledge that the Marietta Board of Education or school officials will not be held responsible for medical or hospital costs resulting from injuries that might occur by participation in school-sponsored activities or in transportation to and from the place where school activities are conducted, except to the extent that any such costs are covered by applicable insurance.

Teacher/Sponsor's Signature Date

Parent/Guardian's Signature Date