

RHODE ISLAND INTERSCHOLASTIC LEAGUE MIDDLE SCHOOL 6-8
WARNING ACKNOWLEDGEMENT, AUTHORIZATION, CONSENT AND
ASSUMPTION OF RISK FORM

SCHOOL USE ONLY <hr/>

We/I, as the parent/legal guardian of the undersigned minor prospective student-athlete, hereby acknowledge that said student-athlete seeks to participate in a student sports program sanctioned by the Rhode Island Interscholastic League (“RIIL”). We/I specifically assert we/I have read, understand and agree to fully comply with all rules and regulations of the RIIL; we/I hereby further authorize the release of information and reports concerning the academic standing, medical condition, financial aid, attendance, residency, and disciplinary record of the undersigned student-athlete to the RIIL for the purpose of enforcing the rules and regulations of the RIIL; that we/I are aware, understand, and appreciate that athletic participation requires emotional and physical fitness; that we/I agree the student-athlete possesses such fitness; and further acknowledge that some risk of injury is involved in sports participation. **For sports involving helmets, we/I acknowledge, appreciate, and agree to the following warning: Do not use and helmet to butt, ram or spear an opposing player. This can result in severe head, brain, or neck injury, paralysis or death to you and possible injury to your opponent. There is a risk these injuries may also occur as a result of accidental contact without intent to butt, ram or spear. No helmet can prevent all such injuries.**

We/I acknowledge that by entering any premises and participating in sports programs sanctioned by the RIIL there are risks to the student-athlete and to those with whom the student-athlete interacts of exposure, directly or indirectly, to communicable disease(s) including, but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, “Covid-19”, and/or any mutation or variation thereof.

Now, therefore, pursuant to the Rhode Island General Laws § 7-6-9 and § 9-1-48, we/I, in consideration for participation in an RIIL-sanctioned sports program, herein grant to the RIIL, its officers, directors, trustees, volunteers, participants, event sponsors, agents (to include, but not be limited to, the local school committees or their parochial or private equivalent), servants, employees, and assigns (the “Releasees”), a release, waiver, and discharge from all liability arising from practicing or participating in any sports program sanctioned by the RIIL. We/I specifically acknowledge that a risk of injury or death exists and assume said risk with respect to practicing for or participating in any contest or exhibition of an athletic or sports matter sanctioned by the RIIL. We/I further agree to INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees from any loss, liability, damage, or cost they may incur arising out of or related to the student-athlete’s illness, injury, or death, whether caused by the negligence of the Releasees or otherwise.

In recognition of the Rhode Island General Laws § 9-1-28.1 and all other similar or applicable laws and regulations, we/I, in further consideration for participation in a RIIL sports program, herein grant to the Releasees the absolute right, consent, and permission to at any time and by any method record the student-athlete’s name, voice, and likeness and to utilize or assign the use of the student-athlete’s name, voice, and likeness in any manner of media whatsoever, known or unknown at this time, for purposes of athletic or academic award, publicity, promotion, exhibit, display, trade, announcement, action or advertising, of any kind without restriction.

We/I release, waive, and discharge the Releasees from all liability arising from the same. All students must sign and have a parent or legal guardian also sign. **All forms are to be notarized and kept on file at their school.**

School (Print)

City or Town of School (Print)

Legal name of student (First, Middle, Last)

Date of birth of student

Name of Parent/Guardian (Print)

Full address of Parent/Guardian (Print)

The student resides in the home with the following (select all that apply):

Birth Mother Birth Father Legal Guardian(s) Other

Signature of Student

Signature of Parent/Guardian

Date of signature

Notary Public signature

Notary Name (Print)

Commission Expires

Notary ID # _____