

CORNERSTONE CHRISTIAN ACADEMY ATHLETIC
TRANSPORTATION PERMISSION AGREEMENT
FOR THE 2024-2025 SCHOOL YEAR

Name of Student _____

EXTRA-CURRICULAR AUTHORIZATION AND HOLD HARMLESS AGREEMENT

I hereby consent for the above-named student to (1) represent the Cornerstone Christian Academy and participate in school activities (including extra-curricular activities) approved by the school, and to (2) any school team, club, group, or organization on any of its local or out-of-town trips. I do hereby, as parent/legal guardian/managing conservator, and on behalf of the student agree to indemnify and hold harmless Cornerstone Christian Academy from any claim or action for property damage, personal injury, or death arising from on or on account of such extra-curricular activity or trip, regardless of whether such claim or action is founded in whole or in part upon the alleged negligence of Cornerstone Christian Academy, its agent, employees, or representatives.

MEDICAL AUTHORIZATION AND HOLD HARMLESS AGREEMENT

In the event of an injury, illness, or other medical emergency, the undersigned authorizes Cornerstone Christian Academy or a representative of the school's administration to act as the undersigned's agent and/or attorney-in-fact and further authorizes and consents to any and all medical treatment and assistance by a doctor, dentist, hospital, or other medical facility or qualified person as the school or its representative deems necessary or appropriate. Any person or facility providing medical treatment or assistance may rely on this authorization as being in full force and effect unless and until they receive written instructions from the undersigned to the contrary. I do hereby agree to indemnify and hold harmless Cornerstone Christian Academy from any claim or action for personal injury or death arising for or on account of such medical treatment, regardless of whether such claim or action is founded in whole or in part upon the alleged negligence of Cornerstone Christian Academy, its agents, employees, or representatives.

Sponsor: COACH

Mode of Transportation: CCA Van or any transportation method deemed appropriate by CCA Administration

Telephone Number of Parent/Guardian _____

Additional Emergency Phone Numbers _____

Signature of Parent/Guardian _____

Date of Parent Signature _____