WASHOE COUNTY SCHOOL DISTRICT

HIGH SCHOOL REGULAR SEASON AND OFF-SEASON

SPORTS/CONDITIONING PERMIT

AGREEMENT TO OBEY INSTRUCTIONS, RELEASE, ASSUMPTION OF RISK AND AGREEMENT TO HOLD HARMLESS IN ATHLETICS

Instructions to Student and Parent:

Please read both the STUDENT and PARENT provisions of this form. Sign, date, and return this form.

STUDENT:

I am aware playing or practicing play/participate in any sport can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risks of playing or practicing to play/participate in an off-season in an off-season sport/conditioning program include, but are not limited to, death, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and may also impair/negatively impact my future abilities to earn a living, to engage in other business, social and recreational activities, and generally enjoy life.

Because of the dangers of participating in a sporting activity, I recognized the importance of following coaches' instructions regarding playing techniques, training, and other team rules, etc., and agree to obey such instruction.

In consideration of the Washoe County School District permitting me to participate in a regular season or off-season sport/conditioning program and to engage in all activities related to said program. I hereby assume all risk associated with participation and agree to indemnify, defend and hold the Washoe County School District, its Trustees, employees, agents, representatives, coaches and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of any kind and nature whatsoever which may arise by or in connection with my participation in a regular season or off-season sport/conditioning program.

I fully understand that participation in an off-season program does not guarantee me a position on a team and/or a place in the starting line-up. I have not been pressured by a coach to participate nor have I been informed that this off-season sport/conditioning program is a requirement in order to be a member of the said team.

The terms hereof shall serve as a release and assumption of risk for me, my heirs, estate, executor, administrator, assignees, and for all members of my family.

_____ _____

Signature of Student Date

PARENT/LEGAL GUARDIAN:

I affirm that I am the lawful parent/legal guardian of the previously mentioned student. I have read the student warning and release and understand its terms. I understand that all sports can involve **RISK OF INJURY** and those risks include, but are not limited to, those outlined in the student section above. I also certify that my child/ward has no ailment or organic defect that would make participation in a sport activity dangerous to his/her health. I further agree to assume the responsibility of seeing that my child/ward cooperates and conforms to the fullest extent, with the directions and instructions of the individual(s) supervising my child/ward.

I understand it is my responsibility to carry and maintain medical insurance for my child/ward.

In case of an emergency, as parent/legal guardian, I authorize and direct the Washoe County School District or any of its employees, agents, representatives, instructors, coaches, or volunteers to obtain whatever medical care/treatment for my child/ward they deem necessary for the welfare of my child/ward. I understand that, if possible, I will be contacted in the event my child/ward requires medical attention. I grant the licensed health care provider or accredited hospital permission to perform any necessary medical and/or surgical procedures that are essential for the treatment of my child/ward and agree to be responsible for payment for such care. I release the Washoe County School District, its Board of Trustees, employees, coaches, volunteers, and agents from any costs, damages, liability, or loss resulting from the exercise of discretion in summoning professional emergency personnel to attend, transport or treat my child/ward.

I fully understand that participation in an off-season sport/conditioning program does not guarantee my child/ward a position on a team and/or a place in the starting line-up.

The terms hereof shall serve as a release for me, my heirs, estate, administrator, assignees, and for all members of my family.

_____ _____

Signature of Parent Date