WAIVER/RELEASE OF LIABILITY

Please read carefully before signing. This is a release of liability and waiver of certain rights.

As the parent/guardian of the participant, I agree and understand playing or practicing in any sport can be dangerous in nature involving MANY RISKS OF INJURY. I understand that the dangers and risks of death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, serious injury to virtually all internal organs, and serious injury or impairment to other aspects of my body, general health and well-being. I understand that the dangers and risks of playing or practicing to play/participate in a sport may result not only in serious injury, but in a serious impairment of my child's future abilities to earn a living, to engage in business, social and recreational activities, and generally to enjoy life. I, the parent/guardian, hereby agree to indemnify and hold harmless Covenant Classical School, its coaches, officers, directors, agents, employees, and volunteers, against any liability resulting from any injury that may occur to the participant while they are participating in practice, games or traveling to/or from games. The participant also agrees to indemnify Covenant Classical School for any claims, demand action or cause of action by the participant. I, the parent/guardian, authorize any representative of Covenant Classical School to have the participant treated in any medical emergency during their participation in sporting events and practices. Further, I, the parent/guardian, agree to pay all costs associated with the medical care and transportation for the participant. I have noted any medical or health problems that the participant has of which the staff should be aware.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

CICNIED

SIGNED	DATE
DDINITED NAME	DHONE
PRINTED NAME	PHONE
Participants:	
(List only those participating in sports at Covenant Class	sical School)

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