

FREEDOM AREA SCHOOL DISTRICT
PARENT ACKNOWLEDGEMENT OF RISK AND RELEASE

We/I, the parent/guardian(s) of _____ (Student), do hereby acknowledge that we/I have been fully advised, cautioned, and warned by the proper administrative and coaching personnel of the Freedom Area School District that our/my child named above, may suffer serious injury, including but not limited to sprains, fractures, brain damage, paralysis, or even death, by participating in the sport of _____ (Sport) notwithstanding such warnings, and with full knowledge and understanding of the risk of serious injury to our/my child named above which may result, we/I give our/my consent to _____ (Child) participating in the sport(s) of _____ (Sport).

We hereby release, discharge, and/or otherwise indemnify the _____ School District, and their employees against any claim by/or on behalf of the registrant as a result of the registrant's participation in the sport of _____

Circle all that apply:

- | | | |
|-----------------|---------------|-----------------|
| Football | Basketball | Wrestling |
| Soccer | Volleyball | Cheer and Stunt |
| Track and Field | Cross Country | Dance |

We further acknowledge that by providing permission to my/our student to participate in the above-referenced extracurricular activity that the school may take photographs and other reproductions of the activity and may use those reproductions in school newsletters, promotional materials, on its website, or may otherwise disseminate said photographs including identification of the students depicted. This authorization is provided notwithstanding any opt-out election made with respect to student directory data.

WITNESSES:

(Sign) _____
Print Name _____

(Parent Sign) _____
Print Name _____

(Sign) _____
Print Name _____

(Parent Sign) _____
Print Name _____

Date