

RIVERSIDE UNIFIED SCHOOL DISTRICT

**PARENTAL WAIVER & RELEASE AGREEMENT
FOR PARTICIPATION IN VOLUNTARY DISTRICT-SPONSORED ACTIVITY**

PARTICIPANT NAME: _____

NAME OF SCHOOL: **MARTIN LUTHER KING HIGH SCHOOL**

Description of Activity or event: **RIVERSIDE TRADITION TRACK & FIELD CAMP**

Date(s) of Activity or Event: **JUNE 25, 2018 through JUNE 29, 2018**

By my signature below, I hereby give permission for my son/daughter to participate in the above-described activity. Participation in the above activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions 3) catastrophic injuries including paralysis and death. I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in the activities made possible by the above activity. I understand that participation in this activity is voluntary. I understand that this activity could cause serious illness and/or injury or death, and I assume all risks for any such illness and/or injury or death. I am aware that District supervision is being provided for the above-described activity. I am aware and acknowledge that the District is providing transportation to and from this event. I further acknowledge that the District does not provide medical coverage for participants in this activity.

For, and in consideration, of permitting the above named child to participate in the activity described above, the undersigned hereby voluntarily releases, discharges, waives and relinquishes any and all actions or causes of action for personal injury, bodily injury, property damage or wrongful death occurring to his/her child/ward or him/herself arising in any way whatsoever as a result of engaging in said activity or any activities incidental thereto wherever or however the same may occur and for whatever period said activities may continue. The undersigned does for him/herself, his/her heirs, executors, administrators and assigns hereby release, waive, discharge and relinquish any action or causes of action, aforesaid, which may hereafter arise for him/herself and for his/her estate, and agrees that under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute, present any claim for personal injury, bodily injury, property damage or wrongful death against the District, its Board or any of its officers, agents, or employees for and of said causes of action, whether the same shall arise by the negligence of any said persons, or otherwise. The foregoing waiver does not apply in the event of the sole negligence or willful misconduct of the District.

The undersigned hereby acknowledges that he/she knowingly and voluntarily assumes all risks of bodily injury to his/her child/ward or him/herself as stated, and expressly acknowledges their intention, by executing this instrument, to exempt and relieve the District, its Board, officers, agents, and employees from any liability for personal injury, bodily injury, property damage or wrongful death that may arise out of or in any way be connected with the above-described activity. I have read and understand the foregoing and have voluntarily signed this agreement. I am aware of the potential risks involved in this activity and I am fully aware of the legal consequences of signing this instrument.

Parent/Legal Guardian Signature Date

Participant Signature Date

Parent/Guardian Name (Please Print)

Primary Parent Phone #

Alternate Parent Phone #