



**COUGARS**  
CRISTO REY COLUMBUS

**Cristo Rey Columbus High School  
Acknowledgement of Risk  
Waiver and Release of Liability Form**



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In consideration of Participating in Cristo Rey Columbus High School Athletic and Recreational Programs, I, the parent and/or legal guardian, hereby forever release and covenant not-to-sue Cristo Rey Columbus High School its board members, employees, instructors, volunteers, agents, representatives and all others who are involved in any athletic or recreational programs [The Released Parties], from any and all present and future claims resulting from any activity on the part of the school or the Release Parties for property damage, personal injury, wrongful death or any other claim, arising as a result of my child's participation in recreational and or athletic activities incidental thereto, wherever, whenever, or however the same may occur.

I, the parent and/or legal guardian, understand that exercise and or physical activity can be strenuous and subject to risk of serious injury and believe my child to be qualified, in good health, and in proper physical condition to participate in such activity. I understand that these activities involve certain risks, including but not limited to serious injury or death. In addition, I understand that participation in activities incidental thereto, includes, but is not limited to, the possible reckless conduct of other participants. All stresses and hazards associated with these activities cannot be foreseen. I acknowledge that my child will participate voluntarily with knowledge of the dangers involved and hereby agree to accept any and all risks of property damage, personal injury, or death.

Also, I, the parent and/or legal guardian understand that in some cases my child will be transported in school vehicles and or personal vehicles by, employees, instructors, parents or volunteers of Cristo Rey Columbus High School, I further agree to indemnify and hold harmless Cristo Rey Columbus High School and The Released Parties for any and all claims arising as a result of a transportation accident from or to activities or any activities incidental thereto, wherever, whenever, or however the same may be.

I, the parent hereby agrees to give representatives of Cristo Rey Columbus High School, full authority to seek professional medical treatment on behalf of my child, if such treatment becomes necessary during an athletic activity or school activity, including while participating in the Athletic Program. Parent further authorizes representatives of Cristo Rey Columbus High School, to dispense over-the-counter medication if Student requests it.

**I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.**

PRINTED NAME OF PARTICIPANT/STUDENT: \_\_\_\_\_

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

PARENT/GUARDIAN HOME PHONE: \_\_\_\_\_

PARENT/GUARDIAN MOBILE PHONE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_