ATHLETIC WAIVER OF LIABILITY

Print, complete, and return this form to the coach or Athletic Office.

Student _____ Grade _____

Sport: _____

Extra-Curricular Activities Registration

This form must be completed by the student and his/her parents and approved by the Athletic Department before a student is allowed to participate in an extra-curricular activity sponsored by Courtney Christian School.

Parent's or Guardians' Permission & Waiver of Liability
& Authorization for Emergency Care

I hereby give my consent for the above named student to participate in interscholastic teams or extra-curricular activities for this school year. I also agree to reimburse Courtney Christian School for equipment issued to my child should it become lost. I understand the Courtney Christian School cannot accept responsibility for personal items or school uniforms lost or stolen.

I have read and understand Courtney Christian School's "Eligibility Requirements for Students Participating in Extra-Curricular Activities."

I authorize the Athletic Director, School Principal, Coach or Sponsor in attendance at any Courtney Christian School activity to select and secure medical attention as may be necessary for my child as a result of injuries or other events requiring emergency care while I/we are not in attendance at such event.

I hereby release said school official from any and all liability on account of such selection or authorization for any and all damages which occur on account thereof.

Father/Guardian Signature _____ Work Phone _____ - _____

Mother/Guardian Signature _____ Work Phone _____ - _____

Address _____ City_____, MI _____

Home Phone _____ - _____ Date _____ Athlete's Birthdate _____

Family Doctor _____ Preferred Hospital _____

Family Medical Insurance _____

Group or ID # _____