

INDIVIDUAL PARTICIPANT WAIVER/VERIFICATION OF ATTENDANCE

As a condition precedent to an in consideration of permission to use the facilities and building owned by the Reorganized School District R-VII, Jackson County (hereafter called the District), the undersigned hereby knowingly and voluntarily assumes any and all risk inherent in the pursuit of all activities while on the premises of the District or from participating in a District sponsored program. I further waive, release and forever discharge the District, its officials, officers, employees and agents from any suits, claims or judgements that may result from bodily injury, property damage and/or personal loss sustained as a result of the use of said facilities, building or from participation in a District sponsored program. I further agree to pay replacement or repair charges for equipment lost or damaged while checked out to me. Parents must sign for their children, 18 and under, entering any program.

It is further understood and agreed that the persons using the District facility understands that no liability insurance protection or medical insurance coverage is afforded to any person while using District premises.

Participant's Name: _____

Print Parent Name: _____

Parent Signature: _____

I hereby certify that the above participant resides in the R-7 School District attendance area.

If participant attends parochial school or is home-schooled in R7 attendance area, must state R-7 attendance school (not just Presentation, Summit Christian Academy, home-school, etc.).

Parent Signature: _____

R-7 School of Attendance: _____

Date: _____