WOODS CHARTER SCHOOL
WAIVER and RELEASE of LIABILITY
AND INDEMNIFICATION AGREEMENT

Please read carefully before signing—this document has important legal consequences!

I am the parent or guardian of the student participating in Ultimate Frisbee practices, etc., which are taking place on property owned by WOODS CHARTER SCHOOL, to which this Waiver, Release and Indemnification Agreement applies (write name on line below):

_____

Read, initial and date on each line below:

1. My child is physically fit enough to participate in playing ULTIMATE FRISBEE and has no physical or other limitations--including medical conditions or allergies--that would preclude her/him from said participation. **Initials/date: _____**
2. I understand that the sport of ULTIMATE FRISBEE (and all rigorous physical activity) has inherent risks associated with it which may cause significant personal injury or even loss of life. I understand that by signing this Waiver, I assume any and all risk, and take full responsibility, in the event my child sustains a personal injury or other loss due to their participation in this activity. **Initials/date: _____**
3. I hereby waive any and all claims against Woods Charter School, its insurers and employees, for any personal injury, up to and including death, associated with said child's involvement in playing or practicing Ultimate Frisbee on the field owned by WCS. **Initials/date: _____**

I agree to release, indemnify, defend and hold Woods Charter School, and its School Board, employees, contractors, volunteers and insurers, harmless and free from liability for any and all demands, damages, claims, suits, liens and judgments, including costs and attorney's fees of whatever nature, for injury to or death of any person, damage to property, or interference with the use of property, arising from or in connection with said participation in this activity. I am aware that this is a full release of liability and am signing at my own free will. I am legally entitled to waive liability on behalf of the minor named herein.

I understand and confirm that by signing this WAIVER AND RELEASE I have given up considerable future legal rights. I am 18 years of age or older and mentally competent to enter into this waiver on my child's or ward's behalf.

My Name: _____ Phone Number: _____
(Print Full Name)

Signature: _____ Date: _____