

ROCKY RIVER CITY SCHOOL DISTRICT

ATHLETICS /ACTIVITIES SIGNATURE FORM • 2011-2012

In an effort to eliminate the need for completing the variety of forms usually collected for participation in athletics/activities, the following signature section has been created. Please check YES or NO for each item below after reading the Athletic Handbook (available at www.rrcs.org/athleticsactivities_home.aspx):

____YES ____NO We have read the *Student Activity Participant Rules* and fully understand what is expected and agreed to.

YESNO	Athletic Medical Waiver : We grant permission for our child to participate with the team listed below. In doing so, we will assume full responsibility for the payment of all medical expenses for any injury our child receives while the team is under the supervision of the Rocky River school personnel.	
YESNO	Release And Acknowledgment Of Warning By Student and Consent of Student: I do hereby acknowledge that I been properly advised, cautic administrative and coaching personnel of the Rocky River City School I sport/activity listed below I am is exposing myself to the risk of serious of sprains, fractures and ligament and/or cartilage damage which coul or complete, impairment in the use of my limbs; brain damage; paraly and warned, it is still my desire to participate in the below sport, and seport, I hereby further acknowledge that I do so with full knowledge at to which I am exposing myself by participating in the below sport. I further to which I am exposing myself by participating in the below sport. I further to which I seemployees and agents, from liability for any such injury so the Parent: Notwithstanding the above warnings, and with full knowledge injury which may result to our/my child, we/I give our consent for our listed below.	District that by participating in the sinjury, including but not limited to, the risk d result in a temporary or permanent, partial sis; or even death. Having been so cautioned should I choose to participate in the below and understanding of the risk of serious injury rther release the Rocky River City School occurring.
Participant's Na	me (Print)	
Date of Birth	Phone	
Address		
Sport		
Signature of Par	ent/Guardian	Date
Signature of Stu	dent	Date