

**Calvin Christian School**  
**Extracurricular Athletic Participation**  
**Liability Waiver 2011-2012**

**Liability Waiver:** In Consideration of your acceptance of my child: \_\_\_\_\_ as a participant in the Calvin Extracurricular Sports Program, I hereby waive all claims against Calvin Christian School, its employees and agents, its volunteers, its officers, directors and members, and release Calvin Christian School, its employees and agents, its volunteers, its officers, directors and members, for all injuries suffered by my child incidental to, connected with, or arising out of the recreational activities for which my child is enrolled, including injuries suffered as a result of negligence of Calvin Christian School, its employees and agents, its volunteers, its officers, directors and members, but not including injuries suffered as a result of willful or intentional misconduct or gross negligence. I give my approval to my child's participation in all activities during the current season. I understand that the program described on this form for which I have given my permission may be hazardous and that injuries may occur in the normal course of play or instruction, and I assume all risks and hazards incidental to my child's participation including transportation to and from the activities. I understand that Calvin Christian School has no medical or health insurance covering my child. I certify to the best of my knowledge and in consultation with our child's doctor, our child has no physical infirmities or sickness except as follows: (Please list any condition of which you or your doctor are aware of or any other special needs in the Medical Information Section below.)

Medical Information Section and Known Conditions:

\_\_\_\_\_

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Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_