

**Overland High School
PeachFuzz Volleyball 2019**

**PERMISSION TO PARTICIPATE/
RELEASE, ACKNOWLEDGEMENT OF RISK, ASSUMPTION OF
PERSONAL RESPONSIBILITY AND INDEMNITY**

I/we understand that during my child's participation in PeachFuzz Volleyball; he/she may be exposed to risk or possible injury. I/we understand that I/we assume the risk for any injuries or damages resulting from my child's participation in this activity.

I/we have accepted responsibility to verify with my physician that my child has no physical or psychological problems that would prohibit his/her participation in the activity, and agree to advise my child to comply with the instructions and directions of the Cherry Creek School District agents, volunteers and/or employees as participants in this activity.

I/we, _____ (Parent/Guardian), in return for my child's opportunity to participate in PeachFuzz Volleyball do hereby exempt and release the Cherry Creek School District, its directors, officers, employees, volunteers and agents, from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss or injury that my child or I/we might sustain while my child is participating in the activity, whether or not such damage, loss or injury results from the acts or omissions of the Cherry Creek School District, its directors, officers, employees, volunteers or agents. I/we understand that if I/we do not sign this Release, then my child will not be permitted to participate in PeachFuzz Volleyball. I/we hereby represent that I am/we are 18 years of age or older, and that I am/we are the parent(s) guardian(s) of _____ (Student).

I/we further acknowledge that no representations or promises by Cherry Creek School District representatives have been made to induce me to sign this Release. I/we _____ (Parent/Guardian), further agree to indemnify, hold harmless and defend Cherry Creek School District from any claim, cause of action or demand, of any sort or nature, which may at any time be filed or asserted by _____ (Student), participation in PeachFuzz Volleyball which indemnification shall include any costs and attorneys' fees that may be incurred by the Cherry Creek School District as a result of any claims, causes of action or demands. This release is valid and effective whether the damage, loss or injury is a result of any act or omission on the part of the district or its agents, volunteers, or employees. I understand that I voluntarily give up my right to sue the above-mentioned parties.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A RELEASE OF ALL LIABILITY AND A WAIVER OF ANY RIGHT THAT I MAY HAVE ON BEHALF OF MYSELF AND/OR MY CHILD/WARD TO BRING LEGAL ACTION OR ASSERT CLAIM FOR INJURY OR LOSS OF ANY KIND AGAINST CHERRY CREEK SCHOOL DISTRICT. IF ANY ATTEMPT FOR CLAIM IS MADE, I UNDERSTAND I WILL BE RESPONSIBLE FOR ALL DEFENSE COSTS INCURRED BY CHERRY CREEK SCHOOL DISTRICT.

I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THE ABOVE, BEEN GIVEN THE OPPORTUNITY TO ASK QUESTIONS, CONSIDER ITS EFFECTS, UNDERSTAND THIS ENTIRE DOCUMENT AND AGREE TO BE BOUND BY ITS TERMS.

Signature of Parent/Legal Guardian

Date

Name of Child Participant

Birthdate

Name of Child Participant

Birthdate