

PARENT'S APPROVAL AND STUDENT WAIVER

_____ has my (our) permission to participate in all School Board of Brevard County events planned for (Name of Event)_____ scheduled for (Date of Event) _____. This event may include an air filled bounce house, moonwalker, elevated air slide, and other outdoor games/activities.

The undersigned parent or guardian assumes all risk and liability in connection with the student's participation in any and all of the School Board of Brevard County sponsored activities for this event. I (we) hereby release, discharge and will insure the School Board of Brevard County, its officers, employees and agents from all liability, claims or demands for any damage, loss or injury to the student, the student's property, or parent's property in connection with participation in these activities, unless the injury or loss was caused by the sole negligence of the School Board of Brevard County, its employees and volunteers.

I do hereby certify that to the best of my (our) knowledge and belief that my child is in good health and is fully able to participate in these activities. In case of illness or accident, permission is granted for emergency treatment to be administered. It is further understood and agreed that the undersigned will assume full responsibility for any such action, including payment of costs.

I (we) hereby advise that the above named minor has had the following allergies, medicine reactions or unusual physical condition which should be made known to a treating physician or which could limit participation:

If none please write none.

1. _____
Parent / Guardian Signature _____
Date

Print Name _____
Phone

Address City State Zip

2. _____
Parent / Guardian Signature _____
Date

Print Name _____
Phone

Address City State Zip