

School Name _____
Sport _____
Coach _____

Participant Name _____
Participant Grade _____
Participant Date of Birth _____
Participant Phone # _____
Participant Address _____
(include zip code) _____



Release/Authorization to Participate Form

I, _____, am the parent and/or authorized
(Name)
Guardian of _____. I hereby authorize
(Participant)
_____, date of birth _____, to
(Participant) (Participants – Date of birth)
participate in the _____ Program at _____
(Sport/Activity) (Name of School)
during the _____ school year.
(Year)

I am aware that there are certain risks of injury inherent in participation in
_____. Nonetheless, I, individually and on behalf of my
(Sport/Activity)
son/daughter, hereby release, acquit and discharge the Roman Catholic Diocese of Erie,
_____, and
(Name of School) (Name of Coach/Moderator)
_____, their heirs, executors and/or assigns from any and
(Name of Asst. Coach/Moderator)
all claims, actions, debts, damages, costs, loss of service, expenses and compensation,
whatever, in law or in equity, which may hereafter accrue from or arise out of
_____'s participation in _____.
(Participant) (Sport/Activity)

In witness whereof, I sign this form on the _____ day of _____
(Month)
_____.
(Year)

X

(Parent/Guardian)