

Sports Event Waiver Form for Students

Student Information

Full Name

Student ID

Date of Birth

Event Name

Event Date

Waiver and Release of Liability

I acknowledge that participation in sports activities involves inherent risks. I hereby assume all risks associated with participating in this event. I voluntarily waive, release, and discharge the organizers, school, staff, and sponsors from any and all claims for injury, liability, or damages arising from or in connection with my participation, whether caused by negligence or otherwise.

I have read and agree to the waiver terms above.

Emergency Contact

Contact Name

Contact Phone

Parental Consent (If under 18)

I am the parent/guardian of the minor named above and give permission for their participation. I understand and agree to the terms stated in this waiver and release of liability.

I am the parent/legal guardian and agree to the above.

Student Signature

Parent/Guardian Signature

**Please submit this completed form to the school office before the event date.*