

PARENT ACKNOWLEDGEMENT OF RISK AND RELEASE

We/I, the parent(s)/guardian(s) of \_\_\_\_\_ (Student), do hereby acknowledge that we/I have been fully advised, cautioned, and warned by the proper administrative and coaching personnel of the \_\_\_\_\_ (School District) that our/my child named above, may suffer serious injury, including but not limited to sprains, fractures, brain damage, paralysis, or even death, by participating in the sport of \_\_\_\_\_ (Sport) notwithstanding such warnings, and with full knowledge and understanding of the risk of serious injury to our/my child named above which may result, we/I give our/my consent to \_\_\_\_\_ (Child) participating in the sport of \_\_\_\_\_ (Sport). Further, I/we acknowledge that I/we have received the Ohio Department of Health's concussion and head injury information sheet.

We hereby release, discharge, and/or otherwise indemnify the \_\_\_\_\_ School District, and their employees against any claim by/or on behalf of the registrant as a result of the registrant's participation in the sport of \_\_\_\_\_ (Sport).

WITNESSES:

(Sign) \_\_\_\_\_

(Parent Sign) \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

(Sign) \_\_\_\_\_

(Parent Sign) \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

\_\_\_\_\_  
Date