

# Woodridge Local School District

## REQUEST TO VISIT THE PLAYGROUND

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date Visit Requested: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Reason for Visit: \_\_\_\_\_

Time of Visit: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Principal or Designee

### WAIVER AND RELEASE

I am the parent and/or legal guardian of the above-named child.

In consideration of permission to visit the playground at the Woodridge Primary School. I hereby agree to release and discharge the Board of Education of the Woodridge Local School District, its agent, employee, and officers, from any and all claims, demands, losses, action, judgments, and execution which I have ever had, or now have, or may have, or which my heirs, executors, administrators, or assigns may have or claim to have, against the Woodridge Local School District, its successors or assigns, for all personal injuries to myself or my child, known or unknown, and injuries to property, real or personal caused by, or arising out of participating in the above-described activity.

I further accept and assume total responsibility and/or indemnity the Board of Education of the Woodridge Local School District for any and all injuries, claims, demands, losses, actions, judgments, and executions which another child or that child's parents, heirs, executors, administrators, or assigns may have or claim to have, against the known and unknown, and injuries to property, real or personal, caused by or arising out of my conduct while participating in the above-described activity.

In accepting permission and the privilege to participate in the above-described activity under this "Waiver and Release", I covenant for myself, my estate, executor, heirs, dependents, wards, and assigns not to file suit or initiate any claim procedure in respect to any personal injuries, property damage, or losses which may b experienced or sustained arising directly or indirectly out of any intentional negligent participation in the above-described activity and I freely assume all risks, hazards, and losses in connection with the exercise and permission allowed hereunder.

I have read and fully understand the rules and regulations of the Woodridge Local School District, particularly those pertaining to the playground and agree to abide by those rules at all times. Furthermore, I agree to abide by the any and all instructions from the playground supervisors and school staff. I understand that I am considered neither an employee nor a volunteer of the Board of Education of the Woodridge Local School District.

the undersigned has read this release and fully understands all its terms. it is executed voluntarily and with full knowledge of its significance.

In witness whereof, I have executed this "Waiver and Release" at Cuyahoga Falls, Ohio, this \_\_\_\_\_, 19\_\_\_\_\_.

Witnessed:

\_\_\_\_\_  
\_\_\_\_\_