

RELEASE FORM/CONSENT FORM

Whereas, the undersigned is the parent or legal guardian of _____, minor child, who desires to participate in sports through Hendrix Park Recreation Association, Inc. (hereinafter referred to as H.P.R.A.) including but not limited to the Hendrix Park and Pembroke fields and other facilities, and the undersigned being appraised that in order to use said facilities, the H.P.R.A. hereby gives notice that it does not carry any insurance to cover injury of its players. Injuries which may occur as a result of the use of the said facilities and the undersigned, after being fully appraised of the fact, will not hold the H.P.R.A. responsible for injuries suffered while participating in sports with the H.P.R.A. and agrees as follows:

All recreational facilities used by the H.P.R.A. that shall be used by the undersigned and undersigned's above mentioned child will be used at the undersigned's and his/her child's SOLE RISK. The H.P.R.A., it directors, coaches, agents, servants, etc. shall not be held liable for any claims, demands, injuries, damages, actions or causes of action whatsoever to person or property arising out of or connected with the use by the undersigned or his/her child of any of the services or facilities of the recreation areas used by the H.P.R.A. or the premises where to same are located including those arising from acts of passive or active employees, etc. The undersigned does hereby expressly forever release and discharge the H.P.R.A. from all such claims, demands, injuries, damages and action occurring to the undersigned or his/her child.

I have read the above and understand that it is a legal document releasing H.P.R.A. from any claims for any type of damage which may hereinafter occur as a result of the use of the facilities used by the H.P.R.A.

THIS _____ DAY OF _____, 20__.

_____ Parent/Legal Guardian

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FAMILY DOCTOR: _____

PHONE: _____ NAME OF INSURANCE: _____

POLICY #: _____ GROUP # _____ HOSPITAL _____

MEDICATION/ALLERGIES/MEDICAL CONDITIONS/COMMENTS: _____

