Sacred Heart Academy
Athletic Parental Consent Form

Sacred Heart Academy Athletics Parental Consent
Release From Liability and Indemnity Agreement
Year_____ ☐ FALL ☐ WINTER ☐ SPRING

We the undersigned father and mother or guardian(s) of _____ a minor, do hereby consent to her participation in voluntary athletic programs and do forever **RELEASE,** acquit, discharge, and covenant to hold harmless Sacred Heart Academy, a catholic girls high school of the state of Connecticut, and its successors, departments, officers, employees, servants, and agents of and from any and all actions, causes of actions, claims, demands, damages, costs, loss of services, expenses, and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damages which we/I may now or hereafter have as the parent(s) or guardian(s) of said minor and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after she has reached her majority resulting or to result from her participation in the Sacred Heart Academy physical education departments' athletic program including transportation to and from contests and practices:
FURTHERMORE, we/I hereby agree to protect Sacred Heart Academy and its successors, departments, offices, employees, servants, and agents, against my claims for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury in said minor in connection with her participation in the Sacred Heart Academy physical education department's voluntary athletic programs, including transportation to and from contests and practices, and to **INDEMNIFY,** reimburse or make good to Sacred Heart Academy or its successors, departments, offices, employees, servants, and agents any loss or damages or costs, including attorney's fees Sacred Heart Academy or its representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent or reckless acts or omissions while participating in said sports programs including transportation to and from contests and practices.

School: **Sacred Heart Academy** Sport: _____

_____
Signatures of Parent(s) or Guardian(s) Date Relationship

_____
Signature of Student This form may not be alterated
Revised 10/18/04

_____
Student's Last Name First Name Middle Initial

_____
Home Address Zip Code

_____ _____/_____/_____ _____
Telephone No. Date of Birth Grade/Homeroom

(A copy of the birth certificate may be required)

IN CASE OF EMERGENCY CALL:

1._____
Name **Tel. No.** **Relationship**

2._____
Name **Tel. No.** **Relationship**