

ACKNOWLEDGMENT AND WAIVER

I/we am/are the parent/parents/legal guardian of _____. I/we have consented for _____ to participate in the following activity:

I/we acknowledge and fully understand that this activity is not sponsored, conducted, or endorsed by the Surry County Board of Education or by its individual members, its employees, and/or its agents and is not a part of the educational and/or extracurricular activities or programs of the Surry County Schools. I/we further acknowledge and understand that the Surry County Board of Education and its individual members, its employees, and/or its agents are not responsible for any accident or injury that _____ or any other participant may sustain as a result of his/her participation in this activity and does not provide insurance coverage applicable to such accident or injury. I/we hereby fully release the Surry County Board of Education, its individual members, its employees, and its agents from any and all liability whatsoever for any claim for personal injury, property damage, or otherwise arising from or in any manner related to the participation of _____ in this activity.

This the _____ day of _____, 200_____.

Witness

Signature of Parent or other Legal Guardian

Witness

Signature of Parent or other Legal Guardian