BORDENTOWN REGIONAL SCHOOL DISTRICT

PERMISSION FOR **SUMMER PARTICIPATION** AND RELEASE OF CLAIMS

Name of Applicant			
Address			
Grade	Age		
Summer Sport (June12th-	Aug. 31st)		
Date of Last Physical E	xamination		
BRHS Nurse's Signatu	re Approval		
my child or ward to partic confirm that my child or	cipate in Summer A ward has had a physic	(student's(student's) Bordentown Regional High Schothletics during the calendar year al examination within the past year.	ear, Also, I ar.
acknowledge that even w	ith the best coaching, injuries are still a pos	ial for injury which is inherent in use of most advanced protective assibility. On rare occasions these is or even death.	equipment and
permission granteddescribed activity. I here employees, and members	by specifically release of its Board of Educa njuries to property, re	her acts while so engaged and in a child or ward) to participate the Bordentown Regional School tion, of claims or liability for personal or personal, caused by, occurring activity.	te in the above ol District, its sonal injury,
I hereby give my permiss ward) may be taken to the trainer if it is necessary.	ion that in case of an e e hospital for treatmen	emergency, at or treated by the school doctor a	(child on and/or the athleti
addresses drug and alcoh	ol violations that occu	(included in the Students' Handler at any time – whether during a sin extra-curricular activities.	, ·
I, the undersigned, have r with full knowledge of its		nderstand all of its terms. I execut	te it voluntarily
	Signat	ure of Parent/Guardian	Date
	Signat	ure of Student	Date