

**STUDENT-PARENT/GUARDIAN WARNING AND ASSUMPTION OF RISKS & RELEASE**

It is the school district's intent to provide any athlete with good instruction, safe equipment, and safe transportation; but we cannot eliminate all risks involved in sports participation. There is always potential for accidental injury that is completely unrelated to any preventable causes.

This assumption of risks from is designed to provide this school district with a degree of protection. It is not designed to deny the rights of an injured athlete. Our school district provides WIAA Catastrophic Medical Insurance coverage to participating students. Participation in WIAA sponsored interscholastic activities is all voluntary and extracurricular. As a condition to participation in these activities, you and your parent(s)/Guardian(s) must understand THE RISKS involved with these kinds of activities.

**“WARNING”**

Participation in any athletic activity may involve injury of some type to either yourself or a fellow student athlete. Such injury can include direct physical and possibly crippling injury to one's body and the possibility of emotional injury experienced as a result of witnessing or actually inflicting injury to another. The severity of such injury can range from minor to catastrophic injury such as complete paralysis or even one's future ability to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Activity injuries can result from the incorrect or correct performance of playing techniques used in tryouts, practices, warm-ups, games, frills, exercises and other similar undertakings. Injury can also result from failing to follow game, training, safety or other team rules. Injury can result from the use of transportation provided or arranged by the school district to and from interscholastic activities.

Therefore, the purpose of the WARNING is to aid you in making an informed decision as to whether you or your child or ward should participate in these activities. In addition, its purpose is to make you aware that as a student participant, or as a parent or guardian of a student participant, it is your responsibility to learn about and/or inquire coaches, physicians, advisors or other knowledgeable persons about any concerns that you might have at any time regarding participant's safety.

In consideration of the Almira and Coulee Hartline School District's permitting \_\_\_\_\_ (students name) to participate in interscholastic activities and to engage in all areas of these activities, I, the participant, and we the parents(s)/guardian(s), hereby agree to **ASSUME THE RISKS OF INJURY OR DEATH** associated with the Almira and Coulee Hartline School District's Interscholastic program as outlined in the WARNING above.

By signing this document, we acknowledge that we have read and understand it's content and warning related to the above stated risks and give our permission for \_\_\_\_\_ (student's name) to participate in interscholastic activities.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date