

**ST. ANDREW School Athletic Activities**  
**Includes competitive sports teams and intramural clubs**

**WARNING, AGREEMENT TO OBEY INSTRUCTIONS, EMERGENCY SERVICES RELEASE**  
**ASSUMPTIONS OF RISK AGREEMENT TO HOLD HARMLESS, AND TRANSPORTATION WAIVER**

**(Both the applicant student and parent or guardian must read carefully and sign.)**

**Student**

I am aware that playing or participating in any sport can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers of playing or practicing to play/participate, in any sport(s), include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the skeletal system, and serious injury or impairment to other aspects of my body, general health and well-being. I understand that dangers of playing or practicing to play/participate in any sport(s) may result not only in serious injury, but also in serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Because of the dangers of participating in any sport(s), I recognize the importance of following the coaches' instructions regarding playing techniques, training, and other team rules, etc., and agree to obey such instructions.

In consideration of St. Andrew School, permitting me to try out for any sport(s) and to engage in all activities related to the team(s), including, but not limited to trying out, traveling to and from the event, practicing or playing/participating in that sport(s). I hereby assume all the risks associated with participation and agree to hold St. Andrew School collectively and individually, its employees', agents, representatives, medical personnel, coaches, and volunteers, including managers and trainers, harmless from any and all liability, actions, causes of actions, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any St. Andrew athletic activity. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

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

**Parent/Guardian**

I, \_\_\_\_\_, am the parent/legal guardian of \_\_\_\_\_ (student). I have read the above warning and release and understand its terms. I understand that all sports can involve MANY RISKS OF INJURY, including, but not limited to, those risks outlined above.

In consideration of St. Andrew School, permitting my child to try out for any sport(s), including, but not limited to trying out, traveling to and from events, practicing or playing/participating in that sport(s). I hereby agree to hold St. Andrew School collectively and individually, its employees', agents, representatives, medical personnel, coaches, and volunteers, including managers and trainers, harmless from any and all liability, actions, causes of actions, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any St. Andrew athletic activities. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I acknowledge that I have an accident or health insurance plan with \_\_\_\_\_

Policy Holder Name \_\_\_\_\_

Policy Number \_\_\_\_\_

Insurance Phone Number \_\_\_\_\_

Student Athletes Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

I understand that I accept full financial responsibility for any medical bills not covered by my accident or health plan. I authorize St. Andrew School to consent to emergency medical treatment for my child.

Date \_\_\_\_\_ Parent Signature \_\_\_\_\_

