

WELLESLEY HIGH SCHOOL



ATHLETIC DEPARTMENT Home of the Raiders

John Brown, Athletic Director
Kyle Williams, Assistant Athletic Director

MaryAnne McDonald
Admin. Asst. to A. D.

Robert Buffis
Head Athletic Trainer

Athletic Transportation Release Form #1

Name of Student Athlete _____ YOG 20 _____

(Please print)

Sport _____ Date of Contest _____ OR Entire Season _____

Opponent/Location of Contest _____

By my signature below, I take responsibility for transporting my child to and/or from the aforementioned athletic contest, releasing Wellesley Public Schools and its employees from any responsibility and/or liability. I also agree to forever release the Town of Wellesley/Wellesley Public Schools, the School Committee, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic programs and field trips of the Town of Wellesley/Wellesley Public Schools ("the Releasees") from any and all claims, rights of action and cases of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries or property damage resulting from my transporting my child to the Town of Wellesley/Wellesley Public Schools' voluntary athletic program and/or competitions.

I also promise to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceeding of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the Town of Wellesley/Wellesley Public Schools' voluntary Athletic or recreation programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the Town of Wellesley/Wellesley Public Schools' athletic program with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town/City or Public School athletic programs.

Signature of Parent or Legal Guardian

Date

50 Rice Street, Wellesley, MA 02481 Office Phone: 781-446-6290 Ext. 7 FAX: 781-446-6289 Athletic Trainer: Ext.4612

RAIDER PRIDE!