RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

READ BEFORE SIGNING	
IN CONSIDERATION OF my child/ward,	(child's full name), being allowed
to participate in any way in the Locust Parks and Recreation's	(sport) season, its related events
and activities, the undersigned acknowledges, appreciates, and agrees that:	
The risks of injury and illness (ex: communicable diseases such as MRSA, the activities involved in these programs are significant, including the poter while particular rules, equipment, and personal discipline may reduce these exist; and, 1. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREEL and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE responsibility for my child's participation; and, 2. I willingly agree to comply with the program's stated and customary term any unusual significant concern in my child's readiness for participation achild from the participation and bring such attention of the nearest official in the participation and bring such attention of the nearest official in the participants, sponsoring agencies, sponsors, advertisers, used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND DEATH, or loss or damage to person or property incident to my child's in WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASE permitted by law. 4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns HEREBY INDEMNIFY AND HOLD HARMLESS all the above Release involvement or participation in these programs, EVEN IF ARISING FROM permitted by law. 5. I, the parent/guardian, assert that I have explained to my child/ward: the radhering to the rules and regulations, and that my child/ward understands I, FOR MYSELF, MY SPOUSE, AND CHILD/WARD, HAVE READ ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND IT	erisks, the risks of serious injury and death, and erisks, the risks of serious injury and illness do by ASSUME ALL SUCH RISKS, both known ERELEASES or others, and assume full as and conditions for participation. If I observe and/or in the program itself, I will remove my all immediately; and, rsonal representatives and next of kin, HEREBY lirectors, officers, officials, agents, employees, and if applicable, owners and lessors of premises DALL INJURY, ILLNESS, DISABILITY, involvement or participation in these programs, EES OR OTHERWISE, to the fullest extent as, personal representatives and next of kin, ees from any and all liabilities incident to my DM THEIR NEGLIGENCE, to the fullest extent risks of the activity, his/her responsibilities for a this agreement. THIS RELEASE OF LIABILITY AND
HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND	
WITHOUT ANY INDUCEMENT.	ordiviti indeet invo volovimuet
Name of Child/Ward:	
Name of Parent/Guardian:	
Parent/Guardian Signature:	
Date Signed:	
UNDERSTANDING OR RISK	
I understand the seriousness of the risks involved in participating in this proadhering to rules and regulation, and accept them as a participant.	ogram, my personal responsibilities for
Name of Child/Ward:	
Signature of Child/Ward:	
Date Signed:	