

## **Consent and General Liability Release and Waiver of Claims**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**Event Name:** Middle School ASB Social X-Bowl

Location: Tech City Bowl, 13033 NE 70th Pl., Kirkland
Event Date(s): Saturday, January 29, 2011, 8:30 p.m. to 12:00 midnight
I, the parent/legal guardian of the above named student, do hereby give my approval of his/her participation in the above named event on the specified date.
I understand that there are risks involved in all these activities and that there will be times in the course of this event that it is not possible for the School or its employees or volunteer(s) to supervise my child during the entire time that the students are at the event. I understand that there may be time when my child will be at the above location where direct supervision is difficult or impossible. I will advise and will expect my child to behave in a responsible manner throughout the time that she or he is at this event, whether or not directly supervised by a School employee or volunteer, to always advise event chaperones where she or he will be, and to act as a proper representative of her or his family and her or his school.
I assume all risks and hazards incidental to this event. I do further release, absolve, hold harmless and agree to indemnify The Bear Creek School, its employees, directors, instructors, the organizers, volunteers, their agents, representatives or assigns for this event. I hereby waive all claims against The Bear Creek School, its employees, directors, the instructors, the organizers, volunteers, their agents, representatives or assigns, for any injury to my child, any loss due to theft of or damage to my personal property or for any other consequential or incidental damages caused in any manner whatsoever where any liability is attributable to the absence of reasonable care by agents of the Bear Creek School and or arising from my student's participation in the event.
I further state there is no medical condition, including allergies, of any kind that my child (named above) has that would prevent him/her from participating in this event, with or without reasonable accommodation.
By signing my name in the space below, I am agreeing to the above Consent and General Liability Release and Waiver of Claims.
Parent or Guardian Signature:
Parent or Guardian Name (please print):
Date: