

Running Club Permission and Release Form

Date:	January 16 – March 13, 2014
Departure Time:	
Return Time:	8:00 a.m.
Destination(s):	La Jolla High School Track or Gillispie Pirtle Field
Planned Activities:	Running
Supervision by:	Ed Whelan
Transportation by:	Walking
Other requirements: (e.g. sack lunch, special clothing, or other equipment needs)	Proper running shoes and attire
Cost per student:	

Return form by: _____

(Please see other side for waiver and emergency information)



Permission, Waiver, Release and Indemnity Agreement

I, _____ / _____ of _____
(name) (relationship) (student)

In consideration for permitting the student named above to participate in the Running Club, I for myself, my child, (and my spouse), as the parent or legal guardian of the student named above, hereby voluntarily release, discharge, waive and relinquish all claims that each may have against The Gillispie School, its officers, agents and employees, arising out of or in any way related to the above described activity, including but not limited to, claims for bodily injury, personal injury, emotional distress, property damage or wrongful death occurring to the student arising out of the stated activity. This release, discharge, waiver and relinquishments also pertains to any instruction or supervision related to the activity on the part of The Gillispie School, its officers, directors, trustees, employees, and agents.

The student and the parent(s)/guardian(s) further agree that in the event any one of them makes a claim against The Gillispie School, its officers, directors, trustees, employees or agents, arising out of or in any way related to the above described activity, including but not limited to a claim for bodily injury, personal injury, emotional distress, property damage and/or wrongful death arising out of or participation in the activity, then such student, parent and/or guardian shall defend, indemnify, and hold harmless The Gillispie School, its officers, directors, trustees, agents and employees, from said claim(s).

The parent(s)/guardian(s) acknowledge that they have read the "Permission, Waiver, Release and Indemnity Agreement" and are aware of the legal consequences of signing this binding document.

Parent/Guardian: _____ / _____ / _____
(Name) (Signature) (Date)
Parent/Guardian: _____ / _____ / _____
(Name) (Signature) (Date)

Emergency and Medical Information

It is understood that in all matters relating to the operation of the school and all school-sponsored activities, the school through its agents and employees stands in loco parentis to the student. I agree that in the event of an accident or sudden illness, in the opinion of a duly authorized representative of The Gillispie School, it becomes necessary to obtain emergency medical care for the student, such representative may obtain such medical care without my further consent. I personally assume responsibility for any costs that are not covered by insurance.

Student's Name: _____

Emergency contact: Name _____ Phone # _____

Additional contact: Name _____ Phone # _____

Student's Primary Physician: Name _____ Phone # _____

If there are any physical conditions or medications that the school should be aware of in dealing with the student on this trip, please indicate them in the space below.

Parent/Guardian: _____ / _____ / _____
(Name) (Signature) (Date)
Parent/Guardian: _____ / _____ / _____
(Name) (Signature) (Date)

(Please see other side for Running Club information)