

Sayre Area School District  
Recreation Department

Sayre Summer Recreation Program Permission Form

Student Name \_\_\_\_\_ Grade \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
School attending \_\_\_\_\_

I/We the parents or guardian of the above named child, who is eligible for the Sayre Area School District Recreation activities, hereby give my/our approval to his/her participation in any and all of the activities of the Sayre Recreation program during the summer of the 2005 school year. I/ we do further hereby release, absolve, indemnify and hold harmless the adult supervisors, counselors, group leaders, lifeguards and the Sayre Recreation Department/ Sayre Area School District any or all of them in case of injury to myself, my child or ward. I/ we likewise release from responsibility any persons transporting my/our child or ward to or from the activities.

Parents signature (or Guardian) ..... \_\_\_\_\_  
Emergency phone # ..... \_\_\_\_\_

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Program interests:

Parent/student concerns:  
( to be addressed by the program leader):