



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Release/Waiver of Liability and Hold Harmless
Agreement for a Minor
 (Participant Under 18 Years of Age)

Directions: Complete this form and return it to your child's school.

I _____, as parent/guardian of _____
 have been informed and know the risks involved in participating in this _____ event,
 and understand that serious injury, and even death, is possible in such participation and I choose to accept such risk. I
 voluntarily accept any and all responsibility for my child's/ward's safety and welfare while participating in this event, with
 the full understanding of the risks involved. I hold harmless and release the SCHOOL BOARD OF PALM BEACH
 COUNTY, FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS,
 CONTRACTORS AND/OR AGENTS of any and all responsibility and liability for any injury or claim resulting from my
 child's/ward's participation in this event.

In consideration for being allowed to participate in the _____ event,
 I, for my child/ward or his/her heirs, executors and administrators, release and forever discharge the SCHOOL
 BOARD OF PALM BEACH COUNTY, FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES,
 VOLUNTEERS, CONTRACTORS AND/OR AGENTS of all liability, claims, actions, damages, and/or costs/
 expenses my child/ward may have against them, arising out of or in any way connected with my child's/ward's
 participation in this _____ event on (date) _____.
 I understand that this release/waiver of liability applies to ANY claim, even those based upon the negligence,
 actions or inactions of those referenced above, including the SCHOOL BOARD OF PALM BEACH COUNTY,
 FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS AND/
 OR AGENTS.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET
 YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE
 AGREEING THAT EVEN IF THE SCHOOL BOARD OF PALM BEACH COUNTY,
 FLORIDA USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A
 CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING
 IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE
 ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM
 YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM
 THE SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA IN A LAWSUIT FOR ANY
 PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY
 DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE
 ACTIVITY. YOU HAVE A RIGHT TO REFUSE TO SIGN THIS FORM AND THE SCHOOL
 BOARD OF PALM BEACH COUNTY, FLORIDA HAS THE RIGHT TO REFUSE TO LET
 YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

I HAVE READ THIS CAREFULLY, UNDERSTAND IT, AND KNOW IT CONTAINS A RELEASE/WAIVER OF
 LIABILITY.

 Parent/Guardian Signature Date Parent/Guardian Print Name



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Release/Waiver of Liability and Hold Harmless Agreement for an Adult (Participant 18 Years of Age or Older)

Directions: Complete this form and return it to your school.

I _____, have been informed and know the risks involved in participating in this _____ event, and understand that serious injury, and even death, is possible in such participation and I choose to accept such risk. I voluntarily accept any and all responsibility for my own safety and welfare while participating in this event, with the full understanding of the risks involved. I hold harmless and release the SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS AND/OR AGENTS of any and all responsibility and liability for any injury or claim resulting from my participation in this event.

In consideration for being allowed to participate in the _____ event, I, for my heirs, executors and administrators, release and forever discharge the SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS AND/OR AGENTS of all liability, claims, actions, damages, and/or costs/expenses I may have against them, arising out of or in any way connected with my participation in this event on *(date)* _____. I understand that this release/waiver of liability applies to ANY claim, even those based upon the negligence, actions or inactions of those referenced above, including the SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA, ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS AND/OR AGENTS.

I HAVE READ THIS CAREFULLY, UNDERSTAND IT, AND KNOW IT CONTAINS A RELEASE/WAIVER OF LIABILITY.

Participant Signature

Date

Participant Print Name