

BISHOP FENWICK HIGH SCHOOL 2019-2020 ATHLETIC WAIVER

Parental Consent, Release from Liability and Indemnity Agreement

I, the undersigned, parent/guardian of _____, do hereby consent
Student's name
to his/her participation in **voluntary athletic programs, after school clubs, and/or all other**

extracurricular activities while a student at Bishop Fenwick High School. I, _____
Parent/Guardian

hereby release and discharge said Bishop Fenwick High School and/or Archdiocese of Boston, and any and all parties interest from all claims, demands, grievances and causes of action of every kind whatsoever and including but without limitation of the foregoing, all liability for damages of every kind, nature, or description now existing or which may hereafter arise from or out of injuries and damages, known and unknown, permanent or otherwise, received by my son/daughter/ward while participating in athletics, after school clubs and/or extracurricular activities as a student at Bishop Fenwick High School. I have read the above statement and agree to the terms, as stated.

(Parent/Guardian signature)

(Date)