



**2021 Release/Waiver of Liability and Hold Harmless Agreement**

specific to \_\_\_\_\_ (event) held at \_\_\_\_\_ (school) on \_\_\_\_\_ (date).

**Agreement for a MINOR (Participant Under 18 Years of Age)**

My parent/guardian:(hereinafter "RELEASORS") 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 RELEASORS choose to accept such risk. RELEASORS voluntarily accept any and all responsibility for the participant's safety and welfare while participating in this event, with the full understanding of the risks involved, including but not limited to all risks involving COVID-19 and/or exposure to any other infections or diseases. I hold harmless and release the SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of any and all responsibility and liability for any injury or claim resulting from the participant's participation in this event. In consideration for being allowed to participate in this event, RELEASORS and/or their heirs, executors and administrators, release and forever discharge release SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of all liability, claims, actions, damages, and/or costs/expenses the participant may have against them, arising out of or in a anyway connected with the participant's participation in this event. RELEASORS 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 DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS. In the event of an injury requiring medical attention, RELEASORS hereby grants permission to the supervising staff, coach or crew to attend to the participant. If the injury warrants further medical attention with the exception of emergency paramedics, RELEASORS expect every effort will be made to contact a parent or guardian for a participant under age 18 to receive said guardian's specific authorization before action is taken. If efforts to contact a guardian are unsuccessful, permission is given for necessary medical treatment be administered at the District's discretion. In addition, RELEASORS hereby give permission to the supervising staff, coach or crew to take the participant to the physician, dentist, or to the hospital if an accident or serious illness occurs during the participating event and a parent or guardian cannot be located.

**NOTICE TO THE MINOR CHILD'S PARENT/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 DISTRICT OF INDIAN RIVER COUNTY 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 THIS 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 DISTRICT OF INDIAN RIVER COUNTY 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 AND/OR IF THE SCHOOL DISTRICT OF INDIAN RIVER COUNTY AND/OR ITS EMPLOYEES OR AGENTS ARE IN ANY WAY NEGLIGENT EVEN IN THE ADMINISTRATION OF THE EVENT ITSELF. YOU ARE WAIVING YOUR RIGHT TO SUE THE SCHOOL DISTRICT OF INDIAN RIVER COUNTY FOR SUCH NEGLIGENCE. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM AND THE SCHOOL DISTRICT OF INDIAN RIVER COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. I HAVE READ THIS CAREFULLY, I UNDERSTAND IT, AND KNOW IT CONTAINS A RELEASE/WAIVER OF LIABILITY.

**Agreement for Student Over 18 Years of Age**

The participant(s) listed below ( hereinafter "RELEASOR") are over the age of 18, and 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 it is the RELEASOR's choice to accept such risk. RELEASOR voluntarily accept any and all responsibility for the RELEASOR's safety and welfare while participating in this event, with the full understanding of the risks involved, including but not limited to all risks involving COVID-19 and/or exposure to any other infections or diseases. RELEASOR holds harmless and releases the SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of any and all responsibility and liability for any injury or claim resulting from participating in this event. In consideration for being allowed to participate in the event, RELEASOR and/or their heirs, executors and administrators, release and forever discharges releases the SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of all liability, claims, actions, damages, and/or costs/expenses the participant may have against them, arising out of or in anyway connected with the RELEASOR's participation in the event. RELEASOR understands 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 DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS. In the event of any injury requiring medical attention, RELEASOR hereby grants permission to the supervising teacher(s), staff, or crew to attend to the RELEASOR. If the injury warrants further medical attention with the exception of emergency paramedics, RELEASOR expects every effort will be made to provide medical assistance at the discretion of the District's staff. In addition, RELEASOR hereby gives permission to the supervising teachers, staff or crew to take the RELEASOR to the physician, dentist or the hospital if an accident or serious illness occurs during the participating event.

**Agreement for Non Student Participant Over 18 Years of Age**

I, (hereinafter "RELEASOR") as indicated by my signature below, am over the age of 18, and 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 it is the RELEASOR's choice to accept such risk. RELEASOR voluntarily accept any and all responsibility for the RELEASOR's safety and welfare while participating in this event, with the full understanding of the risks involved, including but not limited to all risks involving COVID-19 and/or exposure to any other infections or diseases. RELEASOR holds harmless and releases the SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of any and all responsibility and liability for any injury or claim resulting from participating in this event. In consideration for being allowed to participate in the event, RELEASOR and/or their heirs, executors and administrators, release and forever discharges releases the SCHOOL DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS of all liability, claims, actions, damages, and/or costs/expenses the participant may have against them, arising out of or in anyway connected with the RELEASOR's participation in the event, RELEASOR understands 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 DISTRICT OF INDIAN RIVER COUNTY ITS REPRESENTATIVES, MEMBERS, OFFICERS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, AND/OR AGENTS. In the event of any injury requiring medical attention, RELEASOR hereby grants permission to the supervising teacher(s), staff, or crew to attend to the RELEASOR. If the injury warrants further medical attention with the exception of emergency paramedics, RELEASOR expects every effort will be made to provide medical assistance at the discretion of the District's staff. In addition, RELEASOR hereby gives permission to the supervising teachers, staff or crew to take the RELEASOR to the physician, dentist or the hospital if an accident or serious illness occurs during the participating event.

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

Participant's name (print):	Guardian's name (print):	Guardian's signature:	Date