WARNING, AGREEMENT TO OBEY INSTRUCTIONS, RELEASE, ASSUMPTION OF RISK, AND AGREEMENT TO HOLD HARMLESS

Both the applicant student and a parent or guardian must read carefully and sign below.

SPORT: Volleyball	
	STUDENT
MANY RISKS OF INJURY injuries which may result in corjoints, ligaments, muscles, ten virtually all internal organs, and well-being. I understand that it sport may result not only in sert to engage in other business, so dangers of participating in the regarding playing techniques, to consideration of Providence Clarall activities related to the team that sport, I hereby assume all to Christian School, its employees debts, claims or demands of an participation in any activities related to the service of the servi	I understand that the dangers and risks of death, serious neck and spinal implete or partial paralysis, brain damage, serious injury to virtually all bones dons, and other aspects of the muscular skeletal system, serious injury to discribe death, serious injury or impairment to other aspects of my body, general heath and he dangers and risks of playing or practicing to play/participate in the above ious injury, but in a serious impairment of my future abilities to earn a living ocial and recreational activities, and generally to enjoy life. Because of the above sport, I recognize the importance of following coaches' instruction raining and other team rules, etc., and to agree to obey such instructions. In assical Christian School permitting me to try out for the team and to engage in the risks associated with participation and agree to hold Providence Classical, and volunteers harmless from any and all liability, actions, causes of action by kind and nature whatsoever which may arise by or in connection with my related to Providence Classical Christian School volleyball team. The term and assumption of risk for my heirs, estate, executor; administrator, assignees
Date	Signature of Student
	PARENT
volleyball team and to engage practicing or playing/participati with participation and agree representatives, coaches, and vo- claims, or demands of any kin	e Classical Christian School permitting my son/daughter to try out for the in all activities related to the team, including, but not limited to, trying out ing in that sport, I hereby assume all the risks of my son/daughter associated to hold Providence Classical Christian School, its employees, agents olunteers harmless from any and all liability, actions, causes of action, debts d and nature whatsoever which may arise by; or in connection with his/he lated to Providence Classical Christian School volleyball team.
	as a release and assumption of risk for my son's/daughter's heirs, estate, nees, and for all members of his/her family.
Date	Signature of Parent or Guardian