



# Liberty Christian Academy

## Of Richlands

### RESPONSIBILITY RELEASE FORM

(Athletic Participation)

I hereby grant permission for my son/daughter \_\_\_\_\_ to participate in all activities as a Liberty Christian Academy athlete, including volleyball, soccer, basketball, baseball/softball, and other related activities. I hereby waive and absolve Liberty Christian Academy, its staff and administration of any and all liability and responsibility for injuries or sickness that may occur during the above listed games or practices as well as travel to and from the activities. I understand prudent safety precautions will be taken and that all athletes will be under the supervision of an adult while participating in any athletic event, and will be responsible to adhere to that guideline. A list of guidelines will be provided in the school's athletic policy.

\_\_\_\_\_

(Parent/Guardian Signature)

\_\_\_\_\_

(Parent/Guardian Signature)

### EMERGENCY INFORMATION

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Doctor Name \_\_\_\_\_

Doctor Phone # \_\_\_\_\_