

WAIVER AND RELEASE

CATHOLIC DIOCESE OF EVANSVILLE

School/Church _____ Resurrection _____ City _____ Evansville _____

Youth's Name _____

Event and Dates of the event:

(Please complete one form per player per sport. Please circle the sport you are permitting your child to participate in and complete the blank for the years.)

Volleyball – July 20 ___ – October 20 ___

Soccer – July 20 ___ – October 20 ___

Basketball – October 20 ___ - January 20 ___

Cheerleading – October 20 ___ - January 20 ___

Wrestling – January 20 ___ - March 20 ___

Track – March 20 ___ - May 20 ___

I/We, the parents of the above-named youth, hereby give my/our approval for his/her participation in the above event. I/We assume all risks and hazards incidental to the conduct of the activities and transportation to and from the event. I/We do further hereby waive, release, absolve, indemnify and hold harmless the Bishop of the Catholic Diocese of Evansville, Resurrection Parish, Fr. Philip Kreilein, Pastor of Resurrection Church and any of their respective affiliates, successors, agents, employees, members, and representatives, adult sponsors, and other volunteers involved in the activities and transportation associated with the event from any and all claims, including claims of personal injury to my/our youth or property damage, under any theory of law (including negligence, but not reckless or intentional conduct) in any way resulting from or arising in connection with the activities and/or transportation to and from the event.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Guardian's Signature _____ Date _____

For each activity, parents/guardians will also need to complete an parent contact form and pay a \$25.00 sports fee.