

**Acknowledgement of Risk and Insurance Statement**  
(To be completed and signed by parent/guardian)

I hereby freely and expressly assume and accept any and all risk of injury and/or death arising from my participation in any and all athletic activities I may undertake by or through Grace Christian School, or while traveling to and from such activities, or from the use of any equipment provided or furnished to me by Grace Christian School. I hereby release Grace Christian School from liability for any and all injuries and damages, including death, arising from my participation in any and all athletic activities I may undertake, including the use of any and all equipment provided or furnished to me. In so doing, I release Grace Christian School from all liability, including, but not limited to, liability for negligence, failure to warn, product liability and warranty arising out of or in any way connected with my participation in athletic activities. Furthermore, I promise and agree not to make any claim or commence any lawsuit against Grace Christian School for injuries or damages arising from my participation in such activities or from the use of such equipment. As to the use of any equipment provided or furnished to me by Grace Christian School, I expressly disclaim any and all warranties connected with such equipment. I have inspected and agree to accept such equipment "as is," and agree that there are no warranties with respect to such equipment which extend beyond the face of this agreement. I also acknowledge that I am required to carry and maintain my own accident and health insurance sufficient to meet all costs and expenses which I might incur as a result of any injury I might sustain while participating in athletic activities, and by initialing below I acknowledge that I am presently covered by such health insurance.

(Please initial: \_\_\_\_\_)

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of important legal rights and a disclaimer of important warranties, that I am signing this agreement in consideration of my participation in athletic activities, and that this agreement is an enforceable contract between myself and Grace Christian School, which I sign freely and voluntarily. (Please initial: \_\_\_\_\_)

I hereby indicate that I am covered by personal health and accident insurance.

Name of Insurance Carrier: \_\_\_\_\_

Address of Insurance Carrier: \_\_\_\_\_

Phone Number of Insurance Carrier: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian if Legally a Minor:

\_\_\_\_\_ Date: \_\_\_\_\_