



2017 Football Program
3rd & 4th Flag and 5th & 6th Tackle

My child, _____, has my permission and the proper insurance to participate in the Community Education football program. I agree to abide by all School District rules and regulations when participating in any programs offered through Community Education. I understand that participating in such programs may involve the risk of personal injury or loss of property. By voluntarily choosing to participate in the Delano School District's Community Education program(s), I agree to waive and release the School District from any and all liability, actions, and claims for personal injury, death, or property loss arising out of my participation in the program, except those claims resulting from the District's gross negligence. I also agree to hold the Delano Public School District harmless from any and all claims, demands, or liabilities for injury, death, or loss of property arising out of my participation in any Community Education program.

Medical Concerns: _____

Preferred Hospital: _____

(parent signature)

(emergency phone number)

(date)