

Running Tribe Liability Waiver 2017 -2018

I/we do hereby acknowledge, recognize and accept the inherent risk of bodily injury, disability, paralysis and/or death to myself/ourselves and/or my/our children that exists as a result of my/our participation in any athletic endeavor and specifically, by my/our participation in athletic endeavors offered or hosted by BCI, coaches and staff. As such, I/we do hereby agree to save, hold harmless and indemnify BCI, coaches and staff, its owners, employees, agents, and other individuals or entities operating on behalf of, BCI, coaches, and staff for any bodily injury, disability, paralysis, and/or death, that I/we and/or my/our child(ren) may sustain as a result of my/our participation in any athletic endeavor offered by BCI, coaches, and staff. In the event that I/we or my/our child(ren) suffers some type of injury or illness which requires immediate medical treatment, I/we do hereby Consent to and authorize the Administration of such first aid and/or medical treatment to myself/ourselves and/or my/our child(ren) by Employees and/or agents of BCI, coaches, and staff trained to administer such first aid and/or medical treatment. I/we do further consent to and authorize employees and/or agents of to arrange for ambulance service for an appropriate medical facility for me/us and/or child(ren) by BCI, coaches, and staff.

Signature: _____ Date: _____

Parents: Please sign on behalf of yourself and your child under 18 years of age

Student Name: _____

POD: _____ Teacher: _____

Code of Conduct for Students: As a student participating in after school running tribe, I will keep my hands and feet to myself and be respectful of other students, teachers and volunteers. If I do the following (however not limited to): punch, kick, spit, hit, trip or cuss at anyone I will be removed from Running Tribe without refund and not allowed to come back. I will do my best and have fun all while being respectful. (Both Student and Parent signatures are required stating you have read and agreed to the code of conduct.)

Student Signature: _____

Parents Signature: _____

Please return to Coach Stewart the first day of Running Tribe.

*PICK UP after Running Tribe is located XXXXXXXXXXXXXXXXXXXX