TOWN OF TEWKSBURY TEWKSBURY PUBLIC SCHOOLS

CONSENT AND RELEASE FORM PARTICIPATION IN VOLUNTARY, CO-CURRICULAR AND ATHLETIC ACTIVITIES 2017-2018 SCHOOL YEAR

I/We, the undersigned	
Name(s) of parent(s) or guardian(s)—ir	nsert legal relationship to student, e.g. "parent(s)", guardian(s)
of consent to my/our child's participation in voluntary a ("Programs") of the Town or Public Schools of Tewksbur	,
I/We represent and warrant that I/we am/are authority to so consent and to sign this Consent and Rele	the parent(s) or guardian(s) of said child with ease Form (the "Form").
I/We agree to forever release the Town or Publagents, board members, volunteers, and any and al assisting or participating in said Programs of the Releas causes of action that may have arisen in the past, or mpersonal injuries to my/our child or property damage relations.	ees from any and all claims, rights of action and ay arise in the future, directly or indirectly, from
I/We also agree to indemnify, defend, and hold claims and proceedings of any description that may have in the future, directly or indirectly, arising from person resulting from my/our child's participation in said Program	nal injuries to my/our child or property damage
I/We understand that my/our child's participation child and I/we am/are free to choose not to participate affirm that I/we have decided to allow my/our child to that the Releasees will not be liable to anyone for perso I/we may suffer as a result of participating in said Programmer.	participate in said Programs with full knowledge nal injuries and property damage my/our child or
I/We further affirm that I/we have read this contents of this Form. I/We understand and acknowle may affect my/our legal or my/our child's legal rights, at to have this Form reviewed by legal counsel of my/our child	and that I/we was/were afforded the opportunity
I/We acknowledge that this Form is a legal ins parents or guardians are afforded the opportunity to h signing.	trument, which may affect legal rights, and that ave the Form reviewed by legal counsel prior to
I/We sign this form voluntarily and freely with Releasees have made no representation of fact or opin me/us to agree to sign this Form.	out duress. I/We further acknowledge that the ion to me/us, which in any manner has induced
Witness To Signatures: Signed:	
Date	Parent(s) or Guardian(s) of:
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