

CHESS CLUB



Do you like to play chess or do you want to learn? Then the chess club is for you!
In the chess club you will learn: basic moves, strategies, and positions.
Contact Mr. Otis (room 218) for more information

DAYS: Monday

TIME: 2:10-3:00

Please return this form with a parent/guardian signature.

COST: \$30.00

STUDENT NAME: _____

PARENT/GUARDIAN SIGNATURE _____

TOWN OF TEWKSBURY
JOHN W. WYNN MIDDLE SCHOOL
CLUB/ACTIVITY/ATHLETIC USER FEE FORM

*A School Nurse is not present during after school programs or weekend programs

Family Name: _____

Address: _____

Telephone Number: _____

Student Names (last name, first, name):

Last _____ First _____ Club/Activity/Sport Chess Club

____ Please check here if your family has applied for Free or Reduced Priced Meals through the John W. Wynn Middle School.

The Activities/athletic user fee (\$30.00) must be paid or a waiver granted, before a student participates in the team's first contest or the activities/clubs first function. Please make checks payable to "Town of Tewksbury". If you have any questions, please call the school office at 978-640-7846.

Coaches and advisors will collect the user fees from their participants (all levels) and submit the checks/money orders prior to the activity commencing.

Advisors of all co-curricular teams, clubs and activity-oriented groups will collect the user fees from their participants and submit the checks/money orders and group roster to the Wynn Middle School's man office prior to the activity commencing.

Club/Activity/Athletic user fee must be returned with this form to the respective advisor/coach.

****Payment of \$30.00, must be by check, bank check or money order – CASH IS NOT ACCEPTED.**

MEDICAL:

If your child requires an inhaler or Epipen, please send one with your child to carry/use during afterschool activities.

**TOWN OF TEWKSBURY
TEWKSBURY PUBLIC SCHOOLS
CONSENT AND RELEASE FORM
PARTICIPATION IN VOLUNTARY, CO-CURRICULAR AND ATHLETIC ACTIVITIES
2022 -2023 SCHOOL YEAR**

I/We, the undersigned _____
Name(s) of parent(s) or guardian(s)—insert legal relationship to student, e.g. "parent(s)", guardian(s)

of _____, my/our child a minor,
do hereby consent to my/our child's participation in voluntary athletic, recreation or
extra-curricular programs ("Programs") of the Town or Public Schools of Tewksbury.

I/We represent and warrant that I/we am/are the parent(s) or guardian(s) of said
child with authority to so consent and to sign this Consent and Release Form (the "Form").

I/We agree to forever release the Town or Public Schools of Tewksbury and all their
employees, agents, board members, volunteers, and any and all individuals or organizations
(the "Releasees") assisting or participating in said Programs of the Releasees from any and
all claims, rights of action and causes of action that may have arisen in the past, or may
arise in the future, directly or indirectly, from personal injuries to my/our child or property
damage resulting from my/our child's participation in said Programs.

I/We also agree to indemnify, defend, and hold harmless the Releasees against any
and all legal claims and proceedings of any description that may have been asserted in the
past, or may be asserted in the future, directly or indirectly, arising from personal injuries to
my/our child or property damage resulting from my/our child's participation in said
Programs.

I/We understand that my/our child's participation in said Programs is voluntary and
that my/our child and I/we am/are free to choose not to participate in said Programs. By
signing this Form, I/we affirm that I/we have decided to allow my/our child to participate in
said Programs with full knowledge that the Releasees will not be liable to anyone for
personal injuries and property damage my/our child or I/we may suffer as a result of
participating in said Programs.

I/We further affirm that I/we have read this Form with care and that I/we
understand the contents of this Form. I/We understand and acknowledge that this Form is a
legal instrument, which may affect my/our legal or my/our child's legal rights, and that I/we
was/were afforded the opportunity to have this Form reviewed by legal counsel of my/our
choice before signing this Form.

I/We acknowledge that this Form is a legal instrument, which may affect legal rights,
and that parents or guardians are afforded the opportunity to have the Form reviewed by
legal counsel prior to signing.

I/We sign this form voluntarily and freely without duress. I/We further acknowledge
that the Releasees have made no representation of fact or opinion to me/us, which in any
manner has induced me/us to agree to sign this Form.

Witness To Signatures:

Signed:

Date _____

Parent(s) or Guardian(s) of:
