CALHOUN COMMUNITY UNIT SCHOOL DISTRICT #40 RELEASE AND WAIVER

Name of Participant:
Address:
Name(s) of Parent/Guardian (if under 18 years)
Phone:
The undersigned, hereby acknowledge that said desires to participate in (event/organization) on Calhoun CUSD #40 properties
As consideration for being allowed to participate in this event the undersigned, individually, agree not to make a claim against, sue, attach the property of or prosecute the Calhoun Community Unit School District #40, its Board members, officers, administrators, employees and agents for personal injury, death or property damage resulting to said individual or student while participating in(event/organization).
The undersigned, individually, hereby release and discharge Releasee, its Board members, officers, administrators, employees and agents from all actions and claims or demands we, our heirs, guardians, personal representatives, successors and assigns now or may hereafter have for personal injury, death or property damage resulting from participating in (event/organization).
I HAVE CAREFULLY READ THIS RELEASE AND WAIVER AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE AND WAIVER OF LIABILITY BETWEEN ME AND THE CALHOUN COMMUNITY UNIT SCHOOL DISTRICT #40, AND I HAVE SIGNED IT OF MY OWN FREE WILL.
Signed and dated this day of, 2024 at Hardin, Illinois.
Signature of Individual Participant (over the age of 18)
Printed Name of Individual Participant (over the age of 18)
Parents/Guardian Signature Required for Students under the age of 18