

Fit Kids Waiver

Instructor: Mrs. Audrey Hinds

Class Day and Time: Tuesdays - 3:30-4:30

Session: (6 week course)

Student's Name: _____

Grade/Teacher: _____

My/Our child and I/we are aware that participating in Sports is a potentially hazardous activity. I/We assume all risks associated with participating in sports. All such risks to my/our child are known and understood by me/us and I/we hereby release the agents, coaches, St Edward-Epiphany, St. Edward Church from and against any and all liabilities.

Signature: _____

Date: _____