

**Student Name** \_\_\_\_\_ **(Please Print)**

**ACKNOWLEDGEMENT OF ATHLETIC HANDBOOK**

I have received and read the entire contents of the Athletic Department Handbook set forth by the New Richmond High School. I understand and agree to abide by all rules, policies, and expectations stated in the Handbook.

\_\_\_\_\_  
Parent/Guardian Signature (Date)

\_\_\_\_\_  
Parent/Guardian Signature (Date)

\_\_\_\_\_  
Student Signature (Date)

**PARENT/STUDENT RELEASE FORM**

I/We, the undersigned, being the parents/guardians of (child's name) \_\_\_\_\_, do hereby release, waive, discharge and covenant not to sue the New Richmond Exempted Village School District Board of Education, its employees, agents or anyone acting on its behalf, from any and all liability, claim, demand, action or right of action, of whatever kind or nature, either in law or equity, arising from or by reason of any bodily injury, including but not limited to sprains, fractures, brain damage, paralysis, personal injury or mental injury, known or unknown, including death, resulting from, or to result from (child's name) \_\_\_\_\_ participation in sports and/or any other extracurricular activity on behalf of or in the name of the New Richmond Exempted Village School District Board of Education.

I/We hereby assume full responsibility for and risk of bodily injury, personal injury or mental injury or death due to my/our son/daughter/ward's participation in sports and/or other extracurricular activities on behalf of or in the name of the New Richmond Exempted Village School District Board of Education.

Further, I acknowledge that I have received the Ohio Department of Health's concussion and head injury information sheet.

I/We expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio or any other state in which said student may be injured and that if any portion of this release is held invalid, it is agreed that the balance shall, nevertheless, continue in full force and effect. I/We further state that I/we have carefully read the above release and know the contents of same and sign this release as my/our own free act.

\_\_\_\_\_  
Parent/Guardian Signature (Date)

\_\_\_\_\_  
Parent/Guardian Signature (Date)

\_\_\_\_\_  
Student Signature (Date)