

RELEASE

The undersigned, _____
INSERT NAME OF STUDENT/FACULTY/STAFF/ADMINISTRATION
(PRINTED)

In consideration of being permitted to participate in the following activity:

Weight Room

DESCRIBE ACTIVITY (OR ACTIVITIES)

On the following date(s): _____
INSERT DATE(S) OF ACTIVITY (OR ACTIVITIES)

Hereby releases and forever discharges the Abraham Joshua Heschel High School and its officials, employees, agents and other representatives from any and every claim, demand, actions or right of action, of whatever kind or nature, arising from any bodily injuries, death or property damage resulting from any accident which may occur as a result of participation in the activity set forth above, whether by negligence or not.

The undersigned further releases Abraham Joshua Heschel High School and its officials, employees, agents and other representatives from any claim whatsoever on account of first aid, treatment or other service rendered during or after participation in the activity set forth above.

The undersigned acknowledges that he or she is not required to participate in the activity set forth above and will not be permitted to participate in such activity unless he or she agrees to the terms of this release.

The undersigned further states that he or she has carefully read this release and knows the contents hereof and signs this release as his or her own free act.

SIGNATURE OF STUDENT/FACULTY/STAFF/ADMINISTRATION

DATE

SIGNATURE OF PARENT/GUARDIAN (IF UNDER 18)

DATE