

ANAHEIM UNION HIGH SCHOOL DISTRICT Business/Risk Management 714-999-5657; fax 714-520-5741



VOLUNTARY ACTIVITIES PARTICIPATION

ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize my son/daughter,	, to participate in
the District-sponsored activities of	·
	ities, by their very nature, pose a potential risk of ate in such activities (for instance, athletics, interies, etc.).
I understand and acknowledge that some of participating in these activities include, but are	of the injuries/illnesses which may result from not limited to, the following:
 Sprains/strains Fractured bones Unconsciousness Head and/or back injuries 	5. Paralysis6. Loss of eyesight7. Communicable diseases8. Death
	on in these activities is completely <u>voluntary</u> and course credit or for completion of graduation
son/daughter agree to assume liability and response associated with participation in such activity	er to participate in these activities, I and my ponsibility for any and all potential risks that may ries. I further understand and acknowledge that the medical insurance and/or student accident
	e District, its Board, officers, employees, agents, ness suffered by my son/daughter that is incident participating in this activity.
I acknowledge that I have carefully read th FORM and that I understand and agree to its te	is VOLUNTARY ACTIVITIES PARTICIPATION erms.
Parent/Guardian Signature	
Student Signature	 Date