

**Bishop Rosecrans High School  
Liability and Insurance Waiver Form**

Student's Name \_\_\_\_\_

All student-athletes involved in athletics must realize the inherent risk, hazards and dangers involved in athletic participation. Athletic participation includes practices, athletic contests and travel to and from these activities.

Participation in athletics may involve substantial risks such as bodily injury, property damage and other damages. Substantial risks related to athletic participation include but are not limited to: hypothermia, broken bones, strains, sprains, bruises, drowning, concussion, heart attack, and heart exhaustion, etc.

All student-athletes will be required to sign this Liability and Insurance Waiver Form in order to participate in athletics at Bishop Rosecrans High School.

I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in such voluntary athletics or recreational activities. In this regard, I certify that I am covered by a health and accident insurance policy.

NAME OF INSURANCE COMPANY: \_\_\_\_\_

TYPE OF POLICY: \_\_\_\_\_

EXPIRATION DATE OF INSURANCE COVERAGE: \_\_\_\_\_

I have received a copy of this notice, which I have read and understand. I accept and assume all risks, hazards and dangers involved in any such activities in which I participate, including practices, athletic contests, and travel to and from these activities.

**RELEASE, WAIVER OF LIABILITY  
(READ CAREFULLY BEFORE SIGNING!!!)**

The undersigned hereby acknowledges that participation in athletic programs and recreational activities involves inherent risks of physical injury, illness or loss of personal property and assumes all such risks. The undersigned hereby agrees that for the consideration of Bishop Rosecrans High School allowing the undersigned to participate in athletic activities and in connection therewith, making available to the personnel of the institution, the undersigned participant does hereby waive liability, release and forever, discharge Bishop Rosecrans High School, its members, officers, administrators, the ministry of St. Nicholas/St. Thomas Parish, and employees of and from any and all claims, demands, rights and causes of action of whatever kind of nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damages to property and the consequences thereof, including death, resulting from my voluntary athletic participation in or in any way connected with such athletic activities.

I understand the acceptance of this release, waiver of liability form and understand the inherent risks that are associated with athletic participation.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_