

## RELEASE AND HOLD HARMLESS AGREEMENT

	ORM CAREFULLY and beware while registering to compete and train, you are releasing your laims/injuries and reimbursement for medical bills your child might sustain participating for California Girls Middle School State Wrestling Championships.
	(please print parent/guardians name) recognize and acknowledge that there are certain risks rticipants in the program and I agree to assume full risk of any such injuries, damages or loss ch I or my child/ward may sustain resulting from California Girls Middle School State Wrestling Championship participation.
coaches and its officers a Championship participa and Ukiah Unified School	claims I or my child/ward may have against discharge Ukiah High School, SW Academy Inc., and Ukiah Unified School District resulting from California Girls Middle School State Wrestling tion & hereby fully release and Ukiah High School, SW Academy Inc., coaches and its officers District from any/all claims from injuries, damage or loss which I or my child/ward may have or accrue to me or my child/ward because of CGMSSWC WRESTLING participation.
and Ukiah Unified Sc	ify and hold harmless discharge Ukiah High School, SW Academy Inc., coaches and its officers chool District, or from any/all claims from injuries, damage or losses sustained by me or my cause of California Girls Middle School State Wrestling Championship participation.
I have read	and fully understand the above program details and waive and release all claims.
My child,	, is in good physical health, is able to, and has my permission to participate in the wrestling program.
Student-Athlete l	Name Printed Clearly
	Student Athlete's Signature Date
	Parent/Guardian Signature Date

After signing this form please make a copy of it for your records and return the original on the day of the event