

Lakeside Christian School
OFF-CAMPUS RELEASE AND INDEMNITY AGREEMENT

Permission for Participation in any school or parent requested event that takes students off the LCS Campus.
(Athletic Events, Field Trips, SPC Classes, etc.)

Student Name: _____

Reason:

- Any off-campus event:** _____
- Sport:** _____
- Event:** _____
- SPC Class:** _____

Season or Timeframe: _____

As the parent and legal representative of the above named student, I give my consent and permission for my child to participate in the event(s) listed above. I understand that participating in events and activities is a privilege and not a right and may be revoked at any time by the school administration and/or coaching staff in their discretion.

I understand that Lakeside Christian School cannot always be responsible or arrange for transporting my student to or from practices, games, field trips, off-campus classes, or any other events. I further understand and acknowledge that if Lakeside Christian School cannot arrange or otherwise provide transportation that I am solely responsible for transporting my child to and from events or making alternative transportation arrangements. If the school is able, on occasion, to provide transportation to an event, I hereby give my permission for my child to participate in the school-provided transportation.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED WITH MY CHILD'S PARTICIPATION IN THE ABOVE NAMED SPORTS ACTIVITIES and/or EVENTS, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO, INCLUDING TRANSPORTATION TO AND FROM EVENTS. I do hereby agree to hold Lakeside Community Chapel of Clearwater, Inc., Lakeside Christian School, and its agents and employees harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the laws of the State of Florida and that if any portion thereof is held invalid it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE, WAIVER, AND INDEMNITY AGREEMENT, KNOW THE CONTENTS THEREOF, AND I SIGN THIS DOCUMENT AS MY OWN FREE ACT.

This is a legally binding agreement that I have read and understand.

I assume liability for _____ to (please check all that apply)

- drive his/her own vehicle to the off-campus event listed above.
- be driven to the off-campus event listed above by another parent.
- be driven to the off-campus event listed above by the a member of the Lakeside Christian School staff.
- be driven to the off-campus event listed above by another student.

PLEASE LIST BELOW ALL MEDICAL CONDITIONS AND MEDICATIONS FOR YOUR STUDENT. _____

All medications must be turned in to the school office with instructions. Students cannot have medications of any kind in their possession.

TELEPHONE NUMBER WHERE I MAY BE REACHED IN CASE OF EMERGENCY: _____

Parent/Guardian: _____ **Date** _____

Parent/Guardian: _____ **Date** _____