## Atlantis Charter Middle School Athletics Student Permission Form

I, the undersigned parent and,	or guardian of	(" <u>insert child's name here</u> "), c
minor, do hereby consent to m Charter School. Sport/Activit	y child's participation in voluntar	y athletic or recreation programs of Atlantis
agents, volunteers, affiliates, voluntary athletic or recreation claims, rights of action and call arise in the future, directly or	and any and all individuals and or in programs of the Atlantis Char uses of action, both in law and in indirectly, from personal injurie	pard of Trustees, and all their employees, ganizations assisting or participating in ter School ("the Releasee's") from any and all equity, that may have arisen in the past, or may sor any other harm to my child or property ter School voluntary athletic or recreation
proceedings of any description directly or indirectly, arising f	n that may have been asserted in	leasee's against any and all legal claims and the past, or may be asserted in the future, d or property damage resulting from my child's ecreation programs.
By allowing my child to particip School staff has:	oate in this club/sport/activity, I	I understand and agree that Atlantis Charter
adhere to any and all ru the Athletic Handbook,	iles and/or policies set forth in t and/or any eligibility guidelines.	om any activity for failure to follow or failure to the Atlantis Charter School Student handbook, . If my child is excluded from any club/activity to pick him/her up immediately upon being
Form. I understand that my c free to choose not to participo my child to participate in Atlan knowledge that the Releasees	hild's participation in these prog ate in said programs. By signing <sup>.</sup> ntis Charter School voluntary ath	rm and that I understand the contents of this rams is voluntary and that my child and I are this Form, I affirm that I have decided to allow hletic and recreation programs with full ersonal injuries and property damage my child recreation programs.
practices and games. Student	ts report to the coach for tryou	hool nurse in order to participate in tryouts, ts and practices on time. Parents and Guardians e's dismissal from tryouts or practices.
 Date	Signature of Custodial Pare	ent/Caregiver

Thank you for your continued participation in the education of your child.