



## JMCSS LIABILITY RELEASE FORM

**Please turn in these forms on Race Day at the Team Registration area.**

\_\_\_\_\_  
Student/Participant Name

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Contact Mailing Address

\_\_\_\_\_  
Parent(s) Email(s)

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Primary Parent's Phone Number

- The participant is participating in all Greenpower USA activities and events under his/her own free will, and the Parent/guardian (if the participant is under 18) approves of such participation.
- The Participant and/or Parent(s) are personally responsible for their actions and shall conduct themselves with proper sportsmanship.
- The Participant and/or Parent(s) shall abide by the rules, conditions, guidelines, and decisions of Greenpower USA race/event officials and sponsors.
- The Participant and/or Parent(s) understand that the activities of the event are dangerous and involve risk, accept the conditions under which each of the events and practices are held, and accept and assume all risks inherent in each of these competition events, including injury (fatal or otherwise) and property loss/damage, and including those that are not foreseen or anticipated.
- The Participant and/or Parent(s) agree to assume all costs related to any medical treatment; I authorize my insurance company to pay benefits for the costs of such treatment; I also authorize the disclosure of medical information to my insurance company for the purpose of any claim.
- The Participant and/or Parent(s) understand each participant must provide her/his own medical insurance and also understand that the Participant and/or Parent(s) are responsible for any medical or other charges related to participation in the GreenpowerUSA event(s).
- The Participant and/or Parent(s) give consent for the Participant's medical treatment and permission to event personnel to supervise or perform on-site first-aid for minor injuries and to a licensed physician to hospitalize and secure proper treatment (including injections, anesthesia, surgery, or other reasonable and necessary procedures) for the Participant (If you wish to limit medical treatment, draw a line through it or add your limiting instructions).
- Participant/Parent(s) hereby release, hold harmless, and agree to indemnify Jackson-Madison County School System and its employees, Greenpower USA, event sponsors, organizers, officials, volunteers, and other people and organizations or entities associated with the event (hereinafter "RELEASEES") from any and all liability, whether injury is caused by Participant and/or Parent(s)'s negligence, the negligence of RELEASEES or the negligence of any third party.

Participant/Parent(s) have read the entire Medical Authorization, Release, & Liability Waiver, fully understand it, and agree to be legally bound by it. READ CAREFULLY BEFORE SIGNING.

\_\_\_\_\_  
Print name of Participant

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
If Participant is under 18 years of age

\_\_\_\_\_  
Parent/legal guardian signature

\_\_\_\_\_  
Date

Print name of parent/legal guardian: \_\_\_\_\_