

WARNING, AGREEMENT TO OBEY INSTRUCTIONS, RELEASE,
ASSUMPTION OF RISK, AND AGREEMENT TO HOLD HARMLESS



(Both the applicant student and a parent or guardian must read carefully and sign)

SPORT: Volleyball

STUDENT

I, _____, am aware playing or practicing to play/participate in any sport can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risks of playing or practicing to play/participate in the above sport include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body, general health and well-being. I understand that the dangers and risks of playing or practicing to play/participate in the above sport may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Because of the dangers of participating in the above sport, I recognize the importance of following coaches' instructions regarding playing techniques, training and other team rules, etc., and to agree to obey such instructions.

In consideration of the school district permitting me to try out for the CABRILLO HIGH SCHOOL **Volleyball** team and to engage in all activities related to the team, including, but not limited to trying out, practicing or playing/participating in that sport, I hereby assume all the risks associated with participation and agree to hold the school district, its employees, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to the CABRILLO HIGH SCHOOL **Volleyball** team. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I specifically acknowledge that **Volleyball** is a VIOLENT CONTACT SPORT involving even greater risk of injury than other sports. _____
(student initials)

Signature of Student

Date

PARENT

I, _____ am the parent/legal guardian of _____ (student).

I have read the above warning and release and understand its terms. I understand that all sports can involve many RISKS OF INJURY, including, but not limited to, those risks outlined above.

In consideration of the school district permitting me to try out for the CABRILLO HIGH SCHOOL **Volleyball**, and to engage in all activities related to the team, including, but not limited to trying out, practicing or playing/participating in that sport, I hereby assume all the risks associated with participation and agree to hold the school district, its employees, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to the CABRILLO HIGH SCHOOL **Volleyball** team. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

We assume full responsibility for the maintenance of equipment and accessories issued for sports participation through the year. We will be responsible for all repairs beyond normal wear, and if the equipment is missing or damaged beyond repair will remit to the Cabrillo High School Athletic Department, within 10 days of the sports ending, 100% of the value of the equipment. We understand that equipment for one sport season must be cleared or paid for before a student will be allowed to participate in a succeeding sport season. Failure to clear remaining debts will result in the withholding of student's records including graduation diploma.

Signature of Parent

Date