



Henryk Sienkiewicz Polish School

Authorization and release for _____

(Students last and first name)

The student will watch/participate in the play “W zacczarowanym lesie Czerwonego Kapturka” on **September 30th, 2017 @ 7:45 am -noon.**

RELEASE FROM LIABILITY

We knowingly, fully, and unconditionally release Henryk Sienkiewicz Polish School, Summit, Illinois, the Board of Education, and its Board members, employees, agents, attorneys, representatives, volunteers, and successors, from any and all liability, including but not limited to, actions, causes of actions, any and all damages, debts, claims, obligations, personal injuries, including death, disabilities, medical expenses, attorney’s fees or other demands of any kind and nature whatsoever which may arise by or in connection with our child's participation in the program on

(Date)

The terms hereof shall serve as a release for our heirs, estate, executor, administrator, assignees and agents.

The undersigned has read this Release, fully understand its terms, and execute it voluntarily.

(Date).....

(Parent/Guardian Signature)

Emergency Phone Contact.....