## POST PROM ACTIVITIES APRIL 27-28, 2024 at MILLCREEK-WEST UNITY SCHOOLS

## **CONSENT/PERMISSION FORM**

As a parent/guardian of \_\_\_\_\_\_, I give permission for my son/daughter to be involved in the following **POST-PROM ACTIVITIES**. See the following list:

## rented inflatables and other games involving different levels of physical activity

I/We have reviewed the rules of the activities and agree that the subject of this release will abide by them. I/We also acknowledge that if the subject of the release has to return home early for discipline violations, including refusal to follow current COVID pandemic guidelines, it will be at my/our expense.

I/We understand all reasonable safety precautions will be taken at all times by **Millcreek-West Unity Schools** during the activities. I/We authorize any treatment by an accredited hospital and/or physician deemed necessary for the subject of the release in case of an emergency. I/We understand the possibility of unforeseen hazards and know the inherent possible risk, through no fault of the school or its representatives. I/We agree to not hold **Millcreek-West Unity Schools,** its leaders, employees, or volunteer staff liable for any damages, losses, diseases, or injuries incurred by the subject of this form.

Student Name		
Attending with Hilltop student (if it applies)		
Parent/Guardian Name (Please print)	Name	
Parent/Guardian Signature	Date	
Address/City/Zip:		
Phone		
Health/Med. Ins. Co	Policy Number	

Please list any allergies and/or medical conditions your son/daughter might have, as well as, list any prescription medications he/she may be taking at this time on the back of the form: