

ST. MICHAEL SCHOOL – ATHLETIC FORM #1

APPROVAL AND RELEASE

I hereby certify that \_\_\_\_\_ has my/our approval to  
(student's name)

play at home or away from home on the athletic teams of St. Michael Catholic School,  
Houston, Texas in the following sports:

(Please draw a line through sports that are not approved)

Soccer      Basketball      Track and Field      Volleyball      Football      Softball

In consideration of the admission of (student) \_\_\_\_\_ to the extracurricular athletic program at St. Michael Catholic School, neither St. Michael Catholic Church, its pastor or the clergy, St. Michael Catholic School, the Diocese of Galveston-Houston, the Bishop or any other clergy of said Diocese, nor any parent participating in the above athletic program or, any members or employees of any of the above shall assume any responsibility for accident or injury to \_\_\_\_\_. We, the  
(student's name)

undersigned, agree not to hold any of the above persons or organizations or the employees thereof, liable for any such accident or injury resulting from participation in the above program and we do hereby release them from any such liability and agree to hold them harmless therefrom.

MOTHER'S SIGNATURE: \_\_\_\_\_

FATHER'S SIGNATURE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

WITNESS: I hereby certify that this release was signed in my presence.

Notary Public: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to Athletic Department Coach