



NORTH READING MIDDLE SCHOOL

Respect, Responsibility and Community

189 Park Street

North Reading, Massachusetts 01864

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Catherine L. O'Connell

Principal

Michael J. Maloney

Assistant Principal

CONSENT AND RELEASE FORM

I, the undersigned, _____ of _____,
(parent/guardian) (name of student)

do hereby consent to my child's participation in

Extracurricular Clubs

(name of specific voluntary athletic, extracurricular or recreational activity of the North Reading Public Schools).

I also agree to forever release the North Reading Public Schools, the School Committee, and all their employees, agents, board members, volunteers, and any and all individuals and organizations assisting or participating in voluntary athletic, extracurricular or recreation programs of the North Reading Public Schools ("the Releasees") from any and all claims, rights or action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in North Reading Public Schools voluntary athletic, extracurricular or recreation programs.

I also promise to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the North Reading Public Schools voluntary athletic, extracurricular or recreation programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the North Reading Public Schools athletic, extracurricular or recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary North Reading Public Schools athletic, extracurricular or recreation programs.

Please Complete:

Student: _____

School: _____

Grade: _____

Contact Phone Number: _____

Signatures:

Parent or Guardian: _____

Student: _____

Date: _____

Fee to participate is \$200.00. Please pay by check made out to North Reading Middle School (NO CASH).

Check #: _____