PARTICIPANT RELEASE AND PERMISSION FORM ***READ BEFORE SIGNING***

Organization Name Darlington	School		
Participant Name			
I, for myself and on behalf of my kin, HEREBY RELEASE, INDEMNIFY, A officials, agents and/or employee applicable, owners and lessors of any and all claims, demands, loss INJURY, DISABILITY OR DEATH I may WHETHER ARISING FROM THE NEGLIGEN extent permitted by law under the	and HOLD HARMLESS Dates, other participants premises used to coses, and liability at suffer, or loss or ICE OF THE RELEASEES	arlington School, ats, sponsors, advectonduct the event arising out of or a damage to person	its officers, ertisers, and, if (RELEASEES), from related to any or property,
I also authorize Darlington to ar case of emergency and agree that	-		
I HAVE READ THIS RELEASE OF LIABI UNDERSTAND ITS TERMS, UNDERSTAND IT, AND SIGN IT FREELY AND VOLUNT	THAT I HAVE GIVEN U	P SUBSTANTIAL RIG	
Participant's Signature		Age	Date
FOR PARENTS/GUARDIANS OF PARTICIP REGISTRATION) This is to certify that I, as par participant, do consent and agree Releases, and, for myself, my hei indemnify and hold harmless the R minor child's involvement or part IF ARISING FROM THE NEGLIGENCE OF law under the State of Georgia. I also authorize Darlington to ar case of emergency and agree that	rent/guardian with le to his/her release rs, assigns, and ne Releasees from any a ricipation in these T THE RELEASEES, to	egal responsibility as provided above ext of kin, I releaded all liability programs as provided the fullest extendable medical reasonable medical	ty for this e of all the ase and agree to incidents to my ded above, EVEN t permitted by
x			
Parent/Guardian Signature	Date	Emergency Phone	Number(s)