



Lake City Community Education

Independent School District No. 813
300 S. Garden Street
Lake City, Minnesota 55041
(651) 345-7006
www.lake-city.k12.mn.us



Insurance Release form for Community Education Classes and Activities

Release

In consideration of Community Education Class and Activities, participant assumes all risks in connection with use of the facilities and equipment, including risks of harm, injury or damage to participant.

Participant hereby releases the Lake City Public Schools (the District), its agents, and employees from any and all damages, claims, and causes of action whatsoever for any loss or injury suffered by participant, including any damages, claims or causes of action which may result from the negligence of the District, its agents, or employees. Participant agrees to save and hold harmless the District, its agents, and employees from any claim by participant or participant's estate arising out of participant's use of the District's facilities and equipment. Participant intends by this instrument to exempt and release the District, its agents and employees from all liability whatsoever for personal injury, property damage, or wrongful death caused by negligence.

Names of participating children under 18 _____

I certify that I am the parent or guardian of the above individual and hereby consent to his or her participation in the activity. I have read and understand the above waiver and I agree to be bound by the terms and conditions.

Dated this _____ day of _____ 20__

Signature _____

Print Name _____

Address _____

Phone _____