

**Autauga County Board of Education
Permission Slip and Waiver of Liability**

I, _____, as parent of legal guardian of _____ give permission
(Printed Name of Parent) (Printed Name of Student)
for my child to participate in the ROTC events occurring outside of Prattville (see attached form) ("the Activity").

I understand that the activity is optional and I may have to make special care arrangements for my child during the time of the activity. I assume all risk and hazards of loss or injury of any kind that may arise in connection with the activity, except for gross negligence or intentional infliction of harm by the Autauga County Board Of Education, its officers, employees or agents.

I do hereby agree to release and hold harmless the Board, its officers, employees and agents from Any and all claims, costs, suits, actions, judgments and expenses for any damage, loss or injury to my child or damage to my child's property arising from my child's participation in the activity.

Parent/Guardian Signature

Date

**NOTICE OF EXTRACURRICULAR ACTIVITY:
(GAME/MATCH/MEET/PRACTICE/PERFORMANCE)**

To the Parent/Guardian of Student (s) Participating in Extracurricular Activities, such as a Game, Match, Meet, Practice or Performance:

Name of Participating Student: _____ School: PHS

Please be advised that the above-named student participant is scheduled to participate in

Various JROTC activities _____ game/match/meet/performance/practice/other extracurricular
activity.

The event is scheduled for the _____ day of see attached form 20, in Prattville/Montgomery Alabama.

So that appropriate arrangement for transportation to the event can be made, please promptly advise your student's coach, director, or sponsor of your student's transportation needs to attend the above-referenced event. Please check one of the boxes below indicating how your student will travel to the event.

- Student will require transportation provided by the Autauga County Board of Education
 Transportation will be provided by parent / guardian

Print Parent's / Guardian's Name

Parent's / Guardian's Signature

Date

THIS FORM MUST BE COMPLETED AND PROMPTLY RETURNED TO THE TEAM COACH OR SPONSOR PRIOR TO PARTICIPATING IN THE EXTRACURRICULAR ACTIVITY.

Thank you for your prompt attention to this request.

Principal