



Bellwood School District 88

Roosevelt Middle School

2500 Oak Street

Bellwood IL 60104

Liability Waiver Form

Please Print Neatly!

Student's Name: _____

Address: _____

Parent/Guardian's Name: _____

Parent/Guardian's Phone: _____

Phone Number: _____

Parent/Guardian's Email: _____

Emergency Contact's Name: _____

Emergency Phone Number: _____

Does student have any medical conditions (circle one) Yes No

In case of emergency, do you want the volunteer site to seek medical care? (circle one) Yes No

Physician: _____ Phone: _____

Liability Waiver: I am aware that participation in the Roosevelt Middle School community Service Hours Program may have some inherent risks and injuries can occur. On rare occasions these injuries can be serious. In consideration of my child being allowed to participate in the program, I the parent/guardian, assumes the risk of all injuries and agree not to sue Bellwood School District 88, Roosevelt Middle School, Program Coordinator Community Service Hours Site, School Principal, Bellwood School district 88 Employees or volunteers for any and all injuries caused by or resulting from participating in the Roosevelt Middle School Community Service Hours Program. By signing this waiver, I also authorize the use of pictures of the above-name participants to be posted on the Roosevelt Middle School website or advertising media published by Bellwood School District 88.

Parent/Guardian Signature _____ Date _____