

**SOMERSET BERKLEY REGIONAL
HIGH SCHOOL ATHLETICS
PARENTAL CONSENT, RELEASE FROM LIABILITY
AND INDEMNITY AGREEMENT**

We, the undersigned parent(s) or guardian(s) of _____ Gr. _____

a minor, do hereby consent to his/her participation in voluntary athletic programs and the Impact Testing Program and do forever RELEASE, acquit, discharge, and covenant to hold harmless the Somerset-Berkley Regional High School District, and the Town of Somerset and Town of Berkley (SBRHSD, et als), municipal corporations of the State of Massachusetts, and their successors, departments, officers, employees, servants, and agents, of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which we/I may now or hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in the Somerset Berkley Regional High School District's voluntary athletic programs: FURTHERMORE, we/I hereby agree to protect the Town of Somerset and Town of Berkley and their successors, departments, officers, employees, servants and agents against any claim for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in the Somerset Berkley Regional High School's voluntary athletic programs, and to INDEMNIFY, reimburse or make good to the SBRHSD, et als or their successors, departments, officers, employees, servants and agents any loss or damage or costs, including attorney's fees, the Towns or their representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent, or reckless acts or omissions while participating in said sports programs.

School _____ Sport _____

X _____

Signature of Parent or Guardian
Relationship

Date

