

**INLAND CATHOLIC SCHOOLS LEAGUE
PERMISSION AND INDEMNITY AGREEMENT**

Please fill out this form completely and return it to your child's coach.

My son, daughter, ward, a student at _____ School has permission to participate in a sport hosted by the Inland Catholic Schools League (ICSL). I understand this activity will take place under the supervision and guidance of employees/volunteers of the ICSL.

Student's Name: _____ Name of Sport _____

I would like my child/ward, named above, to participate in this activity. As parent or legal guardian, I agree to defend and fully indemnify the Inland Catholic Schools League and its staff, The Roman Catholic Bishop of San Bernardino, Office of Catholic Schools, and the School my child/ward attends, against any claim which may result from any personal actions taken by my child/ward. I certify that I have an understanding of this agreement and the activity named above, and that I had the opportunity to fully discuss the activity with a school or league representative.

Parent/Legal Guardian _____ Date _____

EMERGENCY MEDICAL AND LIABILITY RELEASE STATEMENT

I understand that in the event medical intervention is necessary, every attempt will be made to contact immediately the persons listed on this form. If I cannot be reached, I give my permission to call Emergency Medical Technicians, a physician or hospital selected by the ICSL, to hospitalize, or perform emergency medical procedures as deemed necessary.

I understand all reasonable safety precautions will be taken at all times by the ICSL and its staff during events and activities. I understand the possibility of unforeseen hazards and how there is the inherent possibility of risk or danger associated with all sport activities.

Parent/Legal Guardian _____ Date _____

Home Phone _____ Work Phone _____

Emergency Contact Names _____

Phone Numbers _____ or _____ or _____

Please furnish medical information about your child/ward which may be pertinent to his or her participation in the above identified activity:

Allergies: _____