Proctor Terrace Elementary

PTA

everychild.onevoice.

PARENT'S APPROVAL AND STUDENT WAIVER

_____ has my permission to participate in all PTA sponsored events for the school year **2019** to **2020**.

The undersigned parent or guardian assumes all risks in connection with the student's participation in any and all of the PTA sponsored activities. I (we) hereby release and discharge the California State PTA, all PTA officers, employees and agents from all liability, claims or demands for any damage, loss or injury to the student, the student's property, or parent's property in connection with participation in these activities, unless caused by the negligence of the PTA.

I do hereby certify that to the best of my (our) knowledge and belief said minor is in good health. In case of illness or accident, permission is granted for emergency treatment to be administered. It is further understood and agreed that the undersigned will assume full responsibility for any such action, including payment of costs.

***** I (we) hereby advise that the above named minor has had the following allergies, medicine reactions or unusual physical condition which should be made known to a treating physician or which could limit participation: (If none, please write none)***

_____ _____

Signature of Parent/Guardian Date

_____ _____

Print Name Phone Number

_____

Address City

State Zip

PROCTOR TERRACE ELEMENTARY

WALKATHON

My child has my permission to participate in the Proctor Terrace School Walk-A-Thon on Friday, September 27, 2019. I understand that the event will begin at 1:30 p.m. and will end at 4:00 p.m. I am aware that I, or my designee(s), are responsible for supervising my child during the Walkathon beginning at school dismissal time.

Student Name/Teacher Name_____

Parent Signature_____

Date_____

Emergency Contact(s) +Phone_____

Person Responsible After School Dismissal (may be designee) + Phone #

_____