



RIVERSTONE
INTERNATIONAL SCHOOL

**Riverstone International School
Hold Harmless Agreement and Release**

I, _____ the undersigned, have authority to execute this Agreement and
(Parent/Guardian)

Release on behalf of _____, who makes the following declarations: I will
(Student's Name)

participate in one or more After-school Activities or Early / After-school Care programs offered by Riverstone International School during the 2009-10 academic year.

I understand and recognize that I am responsible for my own well-being and the well-being of the other participants. I declare that I recognize that it is in my best interest, as well as that of the other participants, to follow the suggestions, guidelines and/or rules of the activity(ies) supervisors, and/or coordinators and that my participation in this activity is entirely voluntary or is at the direction or request of persons or entities not associated with Riverstone International School.

I fully understand and appreciate the potential dangers, hazards and or risks, directly and or indirectly inherent in participating in this activity, which could also include the loss of life, serious loss of limb, or loss of property.

I understand that any school personnel or agents also participating in this activity are not necessarily medically trained to care for any physical or medical problems that occur during this activity. I further understand that the School does not carry medical or liability insurance for me while I am participating in this activity. By placing my signature below, I acknowledge to the School that I have adequate medical and hospitalization insurance for any injuries that I may incur as a result of participating in this activity.

NOW, THEREFORE, in consideration for being allowed to participate in this activity, I agree to hold the supervisor(s) and coordinator(s) of this activity, Riverstone International School, its Board of Trustees, agents, officers, and employees harmless for any and all direct, indirect, special or consequential damages, or costs, legal and otherwise, which I may incur as a result of my participation in this activity(ies), even if due to the negligence of Riverstone International School or any person serving in the above-identified capacities.

I have read the above terms of this Agreement/Release, and I understand and voluntarily agree to the Terms and Conditions. This Agreement/Release shall be binding upon the heirs, administrators, executors, and assigns of the undersigned.

Participant Address _____

Phone Number _____

Participant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(if participant is under 18 yrs)