



Outdoor Adventure Program Release Form

When a person is involved in an outdoor-related activity, injury can occur. Additionally, the nature and location of these activities can require that students be transported in school vehicles to and from the activity site. All students choosing to participate in the Outdoor Adventure Program are required to have personal medical insurance so that they can receive proper attention should such an injury occur. **Saint George's School requires all students choosing to participate in outdoor-related activities to have health coverage providing benefits covering medical services, hospitalization, and X rays.**

Middle School Climbing Club, Spring 2008 Tuesday & Thursday, February 26 through March 27 Time: 3:15 to 5:00 p.m.

Student Name: _____ Home Phone: _____

Address: _____

Mother's / Father's Name: _____ Day Time Phone Number: _____

Emergency Contact: _____

Allergies or other medical conditions that may be life threatening: _____

Health Insurance Provider: _____ Group # _____ Subscriber # _____

Please read carefully before signing

Realizing that there is risk inherent in any outdoor activity and, in consideration of my son or daughter being allowed to participate in this activity, I agree to release and hold harmless Saint George's School, together with its faculty, staff, board members, and other agents, from any and all claims, liabilities, and damages relating to any injury, sickness, death or destruction of any property which may arise out of or result from or be in any way connected with the participation of my son or daughter in such an event other than claims, liabilities or damages arising from the gross negligence of the school or its employees.

Signature: _____ Date: _____
(parent or legal guardian)

