



**Raton High School
Athletics Office**

1550 Tiger Circle
Raton, New Mexico 87740
(575) 445-9111

<https://www.ratonschools.com/rhshome.htm>

Name of Student:

Grade:

Event: FB VB XC BB G C SB BB T


Date:

Location of Event:

Time Student Released:

Waiver of Liability/Hold Harmless: By signing below, and inconsideration for providing my child the opportunity to participate in the NM Athletic Activity, I voluntarily agree to waive and discharge any and all claims against the District related to the transportation and release of my child from the event listed above. By signing below, and inconsideration for providing my child the opportunity to participate in the Activity, I agree to release, discharge, and hold harmless the District and its employees, agents, volunteers, and representatives from all liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising from the transportation of my child _____.

I certify that I am the parent and/or legal guardian of the above-named student OR am the above-named student and am 18 years of age or older, that I have read and understand the foregoing, and accept and agree to be bound by the terms and conditions of the above.

 Signature of Parent/Legal Guardian/Student at least 18 years old

Date

Signature of Parent/Legal Guardian

Date