



WAIVER OF LIABILITY AND RELEASE

USE OF PERSONAL FOOTBALL HELMET FOR PRACTICES AND GAMES

Safety of the student athlete while participating in football is one of the State College Area School District's top priorities. To satisfy that priority, the district provides safety equipment that it believes to be the most appropriate for the prevention of injury to its football players. Should the participating student athlete and the student athlete's parent(s) and/or guardian(s) wish to use their own personal football helmet, rather than the District-issued helmet, State College Area School District cannot be held responsible for any injuries arising from or connected with the student athlete's use of a personal football helmet. The participating student athlete and the student athlete's parent(s) and/or guardian(s) must understand and accept the risk associated with using a personal football helmet for football practices and games.

In consideration of _____ (athlete's name) ("Athlete") electing to use a personal football helmet in place of the District-issued helmet for games and practices, I agree that I, as the Athlete's parent/guardian, on behalf of myself, my spouse, and Athlete, my heirs, assigns, and any other person acting on my or Athlete's behalf, hereby expressly waive, disclaim, and release the State College Area School District and its past, present, and future trustees, employees, and representatives (in their official and individual capacities) from and against any and all claims, demands, costs, liabilities, expenses, causes of action, and judgments of whatever nature, known or unknown, past, present or future, related in any way to any injury sustained by Athlete as a result of Athlete's use of a personal football helmet rather than the District-issued helmet.

I understand that by allowing my child to wear a helmet not provided by the school district I take full responsibility for any injury that can be attributed to the use of this specific helmet.

PARENT OR GUARDIAN'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

PARENT OR GUARDIAN'S PRINTED NAME

PARENT OR GUARDIAN'S PRINTED NAME

DATE

DATE

STUDENT ATHLETE'S NAME

SCHOOL