



WKU Intramural Recreation: Child Release & Consent Form

By signing this form I agree and acknowledge the following:

1. I am familiar with the guidelines of WKU department of Intramural Recreational Sports
2. I know the areas within the Preston Health & Activities Center in which my child can and cannot participate
3. I understand that activities may include physical contact and exercise that could result in injury

Knowing these risks, I hereby agree to waive, release, and discharge Western Kentucky University and the employees and agents of the department of Intramural Recreational Sports from all claims, injuries, damages and actions of any kind resulting from my child's use of the Preston Health and Activities Center.

I certify that my child, _____, has accident/medical insurance. I have read and agree with the guidelines of WKU Intramural Recreational Sports Child Policies as it relates to my child. I certify that all information on this form is true.

Parent/Legal Guardian

Print: _____

Signature: _____

Date: _____

Minor participant's information

Age: _____

Date of Birth: ____/____/____

MM/DD/YYYY

Approved Host's Information

Name: _____

Relation: _____