CRJ STUDENT ACTIVITIES
RELEASE AND WAIVER OF LIABILITY

This form covers all activities offered by the CRJ for the 2026-2027 school year.

Student's Name:_____
Date of Birth: _____
Name/Phone of Emergency Contact: _____

Do you have any physical limitations that could be aggravated by exercise (i.e. back, neck, shoulder or knee problems)?
If so, please explain:_____.

It is your responsibility to inform the instructor of your limitations before class begins.

I agree and acknowledge that I am in good physical health and do not suffer from any medical condition which would limit my participation in the activities offered by the Cristo Rey Jesuit High School. I understand the risks associated with the activities offered and I agree to follow all instructions so that I may safely participate in classes, workshops, or other activities. I hereby WAIVE AND RELEASE Cristo Rey Jesuit High School and its instructors from any claim, demand, cause of action of any kind resulting from or related to my participation in the programs offered at the school. In taking part in the, I understand and acknowledge that I am fully responsible for any and all risks, injuries, or damages, known or unknown, which might occur as a result of my participation.

I have read the above release and waiver of liability and fully understand its content. I voluntarily agree to its content and to the terms and conditions stated above.

Student's Signature:_____
Date Signed:_____/_____/_____

<u>If participant is under 18:</u>

As Parent or Legal Guardian of _____, I consent to the above terms and conditions.

Parent's Name: _____ Signature:_____
Date Signed:_____/_____/_____