

Athletic Participation Release Form

Date: [Insert Date]

To Whom It May Concern,

I, [Parent/Guardian Name], hereby grant permission for my child, [Athlete's Name], to participate in athletic activities organized by [School/Organization Name] for the [Season/Year].

I understand that participation in sports involves physical activity, which may result in injury. I acknowledge that I have been informed of the risks involved and accept full responsibility for my child's participation.

In case of an emergency, I can be reached at [Emergency Contact Number]. I also authorize the staff to secure necessary medical treatment for my child if needed.

By signing this form, I release [School/Organization Name] and its representatives from any liability resulting from participation in athletic activities.

Sincerely,

[Parent/Guardian Signature]

[Parent/Guardian Printed Name]

[Address]

[Email]

[Phone Number]