

Midwestern Intermediate Unit IV
453 Maple Street • Grove City, Pennsylvania 16127-2399

Waiver

I/We, hereby release and save harmless the Midwestern Intermediate Unit IV, their agents, successors, legal representatives and any and all of its employees from any and all liability for any and all harm arising to my/our son/daughter as a result of his/her participation in:

Child's Name: _____

Name of Activity/Event: _____

On _____ From: _____
Month/Day/Year *Beginning Time of Event/Ending Time of Event*

Participation in the above mentioned event is a privilege not a right.
Please retain upper portion of this form for your records.

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On _____ From: _____

Participation in the above mentioned event is a privilege not a right.

Special Notes

Please Fill In

_____ Has my permission to attend
Name of Child

On _____ From: _____
Month/Day/Year *Beginning Time of Event/Ending Time of Event*

Signature of Parent/Guardian

Date