



Waiver to Participate
Brandon McManus Kickball Tournament & Home Run Derby

Parent/Guardian Information

First Name _____ Last Name _____ Phone _____

Email address _____

NPSD Student Registration

First Name _____ Last Name _____ Gender _____

Grade _____ School _____

If your child has been under a doctor's care in the last year, please explain (optional)

If your child had or does have any disorder that would prevent him/her from participating in any strenuous exercise, please explain (optional)

If your child has any conditions/diseases/special needs of which we should be aware, please list below (ie: epilepsy/fainting spells/heart condition/asthma/allergies, etc.)

Emergency Contact

Name _____ Relationship _____ Phone _____

I grant permission for my son/daughter to participate in the Brandon McManus Kickball Tournament and Home Run Derby and certify the above questionnaire as true and accurate in every detail.

Waiver Release: I acknowledge that participation in the Brandon McManus Kickball Tournament and Home Run Derby involves strenuous physical activity, and serious injury, including catastrophic injuries, can result from accidents during this event. I hereby release Brandon McManus, the North Penn School District, and its employees, agents, or servants, from any and all causes of action and claims for injury or damage arising out of my child's participation in the Brandon McManus Kickball Tournament and Home Run Derby .

Parent/Guardian Name _____ Signature _____

I agree to the waiver terms stated above. Date _____