**2022 BRONCO ACES CLUB**

**MEDIA RELEASE AND WAIVER OF LIABILITY**

I hereby consent to have my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, photographed, videotaped, or interviewed while at school or while participating in school functions. I consent to the use of my child’s photograph or likeness in the school newsletters, local papers, the school website, the booster club website, or other electronic, digital or print media. I also give the school and the booster club my consent to use creative work generated or authored by my child on the internet, an educational DC, or any other electronic, digital or print media. I understand that various athletic teams and school clubs will post individual and/or team pictures of my child on school and organization websites. As the child’s parent or legal guardian, I agree to release and hold harmless Brookwood High School Racquet Club, Brookwood High School, and Gwinnett County Public Schools. I also agree that no money or other consideration shall be owed me or my child because of my child’s participation in activities related to Brookwood High School Tennis or Brookwood High School Athletics.

I understand that, by its nature, participation in athletics includes a risk of injury, which may range in severity from minor to long term catastrophic, including permanent paralysis from the neck down or death. Although serious injuries are not common in supervised school athletic programs, it is possible only to minimize, not eliminate, the risk. I understand that participants can and have the responsibility to help reduce the chance of injury. Participants must obey all safety rules and report all physical problems to the coaches. As the child’s parent or legal guardian, I agree to release and hold harmless Brookwood High School Racquet Club, Brookwood High School, and Gwinnett County Public Schools for any and all injury resulting from the negligence of another during the student’s participation in the Bronco Aces Club. By signing this permission form, I acknowledge that I have read and understand this warning.

Student’s Name Grade

BROOKWOOD HIGH SCHOOL

School

Parent’s Signature Date

Parent’s Name (PRINT LEGIBLY)