

**BEDFORD PUBLIC SCHOOLS
BEDFORD, MASSACHUSETTS 01730**



WAIVER FORM

(Student's Name)

(Activity)

(Date)

I the undersigned student aged 18 or over, parent or lawful guardian of _____(student), a minor, do hereby consent to his/her participation in the above named activity which is a voluntary program offered by the Bedford Public Schools do forever RELEASE, acquit, discharge, and covenant to hold harmless the Bedford Public Schools and the Town of Bedford, its officers, agents, employees and attorneys from any and all actions, causes of action, (and) claims on account of, or in any way growing out of directly or indirectly, all known and unknown personal injuries or property damage which _____(student) and/or I may now or hereafter have as the parent/guardian of said minor, and also all claims or rights of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting from his/her participation in the aforementioned activity sponsored by the Bedford Public Schools.

(Signature of Parent/Guardian or Student 18 Years or Older)

(Date)
