

ILION CENTRAL SCHOOL DISTRICT
GOLDEN BOMBER DRIVE
ILION, NY 13357
(315) 894-9934

Assumption of Risk for Use of Facilities

Health issues and injury are an inherent aspect of participation in any physical activity. I understand that through my use of the gymnasium and/or track at the Ilion Junior-Senior High School or the gymnasium at either Barringer Road Elementary School or Remington Elementary School, I am subject to the possibility of health-related problems, and also understand that by my participation, I am accepting this risk.

I wish to utilize the Gymnasium and/or track at the building listed below, to participate in various exercises or games including but not limited to, soccer, volleyball, basketball, running, etc. for recreational purposes only. I understand that exercise, in any form, because it involves stress on the body, includes the risk of minor, serious, and even life threatening physical injury. I further understand that alternative forms of exercise (for example, stretching, running, aerobics, and weight training) entail different and specific kinds of risks. I am knowledgeable regarding the general risks inherent in exercise, as well as the specific risks of any of the activities in which I plan to engage and equipment I intend to use at the gymnasium and/or track.

I hereby represent that I have no physical, medical or other condition that would prevent my safe participation in the fitness activities afforded at the gymnasium or track at Ilion Junior-Senior High School or the gymnasium at either Barringer Road or Remington Elementary Schools. By signing this form, I acknowledge that the School District has advised me to consult with my physician regarding the activities in which I plan to participate and the appropriateness of those activities for me. I have made all such consults and inquiries that I deem necessary and appropriate and declare that I am fit to participate in the fitness activities for which I have requested use of the building. I will cease using the facilities and consult with medical professionals if any condition should develop that calls into question my fitness to use the facilities.

By my signature below, I voluntarily assume all of the risks involved in my use of the gymnasium or track. I hereby voluntarily waive any and all claims against the Ilion Central School District, its Officers and Members of the Board of Education for any injuries or damages resulting from the risks that I have assumed, and I covenant not to sue the School District, its Officers and Members of the Board of Education regarding such risks, injuries and damages.

Building

Primary Activity

Printed Name

Signature (signature of Parent or Guardian if minor)

Date