

**ILLINI WEST HIGH SCHOOL
INSURANCE WAIVER**

**DECLINATION BY PARENT OR GUARDIAN OF OPPORTUNITY
TO PURCHASE INSURANCE UNDER THE SCHOOL PROGRAM
FOR PROTECTION IN ATHLETIC CONTESTS**

_____, a student in the Illini West High School District #307, Hancock, Henderson and McDonough Counties, Illinois, and the undersigned, constituting the parents or legally appointed guardian, do hereby certify that said student IS PROTECTED BY AN INSURANCE CONTRACT against loss or damage by injury in any athletic contests or practices conducted by said school district, its agents or employees to the extent equal to or superior to the plan of insurance offered by said district. The undersigned, as student, and his/her parents or legally appointed guardian, do hereby waive any and all right, claims, or demands that he/she now have or which may arise in the future for and on behalf of said child against said school district, its agents or employees growing out of or by reason of said school district, its agents or employees permitting participation by said student in any athletic contests or practices sponsored or directed by said school district, its' agents or employees without the protection of the plan of insurance made available by said district to said student.

In consideration of said school district, its' agents or employees permitting the above named pupil to participate in an athletic contest, practices, or contests sponsored or conducted by said school district, its agents or employees, the undersigned do hereby agree to save said school district and its agents or employees harmless from any loss or damage to the above named student or the undersigned as its parent or legally appointed guardian by reason of the failure to have in force for the protection of said child the plan of insurance for protection against loss or damage of a child in athletic contests or practices offered by said school district.

Dated: _____.

Parent or Guardian Signature