

Lady Pack Olympic Day 2018

Participant Name: _____

Address & zip code: _____

Cell Phone number: _____

School Attending NEXT school year: _____ Grade: _____

EMAIL Address: _____

Emergency Contact: _____

Emergency Contact Phone Number: _____

I/we, the parents of the above named child hereby give my/our approval for their full participation in Lufkin ISD's Lady Pack Olympic Day and all associated activities/events included in the day. I/We assume all risks and hazards incidental to such participation. I/we do also hereby waive, release, absolve, and agree to hold harmless Lufkin ISD, Fitt Life, Livewell and CrossFit Lufkin and all other parties associated with the Lufkin ISD Women's Coaching Staff for any claim arising out of an injury to my/our child. This includes those accidents/injuries that are due to negligence or any other cause, except to the extent and in the amount covered by accident or liability insurance.

Parent's Signature: _____

Date: _____

- Please contact Coach Boyd (jboyd@lufkinisd.org or at 936 630-4131 for more information)
- ******You may return this form, the CrossFit Lufkin form and your \$25 entry fee on the day of the event at 10:30am. WAIVERS MUST BE SIGNED BY PARENT OR YOU WILL NOT PARTICIPATE-NO EXCEPTIONS!!!!**

- **This event is for Lufkin ISD female students only, grades 6-12 in or interested in Lufkin Girls Athletics.**