

2024-2025 SUMMIT CHRISTIAN ACADEMY ATHLETICS



Consent

I, being the parent or legal guardian of the student named below, do hereby consent to the participation of my student in Summit Christian Academy athletics for the 2024-2025 school year. I also accept the financial responsibility for any and all athletic fees Summit Christian Academy will require for my student's participation in athletics and I agree that said fees will be applied directly from my financial account with FACTS unless other arrangements have been made in advance in writing.

I give my Consent:

Student-Athlete Name _____
Parent Name _____
Parent Signature _____
Date _____

Liability Release

I hereby release, forever discharge and agree to hold harmless Central Texas Summit Christian School System, Inc, hereafter known as Summit Christian Academy, and its directors, employees and agents from any and all liability, claims or demands for personal injury, sickness or death arising in any way out of my student's participation in the events and activities of Summit Christian Academy athletics which include transportation, athletic events, and all related activities.

I have read the Liability Release and give my consent:

Student-Athlete Name _____
Parent Name _____
Parent Signature _____
Date _____