LIABILITY RELEASE FORM
GREENEVILLE HIGH SCHOOL BAND CAMP
LINCOLN MEMORIAL UNIVERSITY, HARROGATE, TN.
JULY 21-26, 2007

As the parent/guardian of _____

I hereby give my permission for said student to attend band camp on the Lincoln Memorial University campus during the week of **July 21-26, 2007**. It is my understanding that this band camp is approved by the school administration and is duly chaperoned by teachers and parents. I understand that Lincoln Memorial University, the Greeneville City Schools, the Greeneville band directors, teachers, counselors, and chaperones will assume no liability for accident or injury claims while performing their duties and/or such claims incurred through the use of the camp facilities including but not limited to practice fields, ball courts and swimming pool. The undersigned individual(s) agrees to hold all of the above harmless with respect to such claims while attending band camp.

The signature of both parents is requested where this is possible.

X_____ _____
Parent/Guardian Signature Date

X_____ _____
Parent/Guardian Signature Date

I understand that my child must obey all rules and regulations of the band camp and Greeneville High School. In case of serious violations of any rules and regulations, the parents or guardians will be notified by phone. After notification, the child will be sent home accompanied by a chaperone. Should the above disciplinary action be necessary, I agree to be responsible for any expenses incurred, both for my child and for the chaperone.

X_____ _____
Parent/Guardian Signature Date

X_____ _____
Parent/Guardian Signature Date