



STATEMENT OF UNDERSTANDING AND WAIVER OF LIABILITY

I recognize that participating in the athletic program of Liberty Christian Academy/Junior Knights sports program is a privilege and not a right. I agree that parents are expected to cooperate with and support the school and sports teams, including coaches. I believe that discipline is necessary for the welfare of each player, as well as for the entire team. I give permission for my child's coach and/or other agent of the Academy sports, to make and enforce team regulations in a manner consistent with Christian principles. Students shall forfeit the privilege of participating in the sports program if they do not conform to the standards and the way of life of the sports program. The coaches reserve the right to withdraw a student at any time that the player, in the opinion of and at the sole discretion of the Academy or sports program, does not conform to the spirit of the Academy. The coaches also reserve the right to eject any parents, and their children, that display behavior inconsistent with a Christian sports program.

I further understand that Liberty Christian Academy prohibits refunds of registration fees or other related team expenses.

In the event that either a photographer or videographer takes a picture of my child, individually, or in a group, I give my permission for my child's picture to be used in future brochures, videotapes, or other publications of Liberty Christian Academy.

I give permission for my child, whose name is set forth below, to take part in all activities pertaining to the LCA sports program, on the premises of Liberty Christian Academy. I indemnify and save Liberty Christian Academy, its employees and agents (including sports coaches) harmless from and against any claims, demands, causes of actions, liability, medical payments, suits and attorney's fees resulting from or arising out of the participation by my child in the above-mentioned activities. I understand that Liberty Christian Academy does not provide medical insurance coverage for my child and that I will be solely and fully responsible for any medical expenses or other liabilities incurred.

I understand that should my marital status change, it is my responsibility to have a corrected Statement of Understanding and Waiver of Liability signed and updated and delivered to Liberty Christian Academy/Junior Knights sports program.

This Statement of Understanding and Waiver of Liability shall remain in effect for as long as my child listed (or others to be registered) attends Liberty Christian Academy sports program events, whether it is team practice or team games. Any reference herein to "child" shall include and refer to all of the children listed, or others to be registered in the future.

Student(s)

Date

Parent/Guardian Signature