

## The School Board of Orange County, Florida

ACKNOWLEDGMENT AND RELEASE

I, the undersigned, understand that this document is a WAIVER and RELEASE of any and all claims that I, my heirs, assigns, personal representatives, or next of kin, may have against The School Board of Orange County Florida (known as Orange County Public Schools), its employees, volunteers, and students, if my child or ward suffer any damages or injuries while participating in the recreational/social voluntary activity listed below. I understand and acknowledge that any medical condition, physical condition, and/or limitation my child or ward may have shall not impede his/her ability to participate in the activities of this event or agree to opt out of any portion of an activity of this event should any medical condition, physical condition, and/or limitation my child or ward may have shall not impede his/her ability to participate. I assume, personally, all risks known and unknown, to include the risk of injury, permanent disability, and death while my child or ward is participating in this event.

On behalf of my child or ward, I herein, for him/her and his/her heirs, executors, assigns, personal representatives, and next of kin, waive, release, hold harmless and forever discharge any and all rights and claims that may arise against The School Board of Orange County Florida, its employees, volunteers, and students from any claims, disability, damages, death, loss, injuries, or damage to personal property that my child or ward may incur during his/her participation in the below referenced recreational/social voluntary activity. This hold harmless shall not apply to any claims, damages, losses, and expenses arising from The School Board of Orange County, Florida's sole gross negligence or intentional misconduct.

Student/ Participant's Name (PRINT) **OCPS Student Number (PRINT)** Parent/Guardian Signature Date Parent/Guardian Name (PRINT) "A NIGHT IN NEW YORK" HOMECOMING DANCE . Purpose of Voluntary Activity on OCPS Property FREEDOM HIGH SCHOOL <u>. SEPTEMBER 20TH, 2025</u> 7:00-11:00pm Name of Orange County Public School/Location Event Date **Event Time** \*\*This form must be maintained for three (3) years by your department/school or Risk Management Department\*\* **Risk Management** RBELC

RBELC 445 W. Amelia Street Orlando, FL 32811 (407) 317-3296 <u>RiskManagement@ocps.net</u>