Homecoming Parade Permission and Release

Turn in ASAP. Deadline is Monday, Sept 20th, 2021

	This individual's permission slip belongs with the	Parade Entry.
Initial Agree		
	I hereby give my permission for	to participate in the Frederick High
	School/Town of Frederick Homecoming Parade on	·
	I fully understand that participants are to abide by all school and city ru	les and regulations governing the parade.
	It is understood that any participant determined to be in violation of the at the parent or guardians expense.	se rules and regulations may be sent home
	I acknowledge that participation in the parade exposes the above named	student to the risk of injury, accident,
	illness or death: and I assume these risks, including, but not limited to:	
	effects of weather, traffic, and the conditions of the road, vehicles and p	•
	the above named student is physically capable of performing the activit	les required in the parade.
	I understand and acknowledge that by consenting to allow the above na	med student to participate in this parade, I
	release and hold harmless Frederick High School/Town of Frederick ar	_ · ·
	agents for any injury, accident, illness or death occurring during or by reagree to relieve FHS/Town of Frederick of any responsibility for damage	1 1
	or by reason of participation in the parade.	e to or loss of property occurring during
	_ In the event of any illness or injury; I hereby consent to whatever transp	• • • • • • • • • • • • • • • • • • • •
	medical, dental or surgical diagnosis or treatment and hospital care from	1 3
	deemed necessary. It is understood that the resulting expenses will be the guardian(s), or participant. (Whenever possible, attempts will be made to	1 2 1 1
	taking any medical action.)	o contact the parent/guardian prior to
	warring unly interious devican)	
	_ I hereby acknowledge that I must ride on a parade float and/or vehicle a	nd not walk unless I am a member of the
	marching band.	
	I acknowledge that throwing items during the parade is strictly prohibite	ed by The Town of Frederick.
	I fully understand that all participants are to dress appropriately for their	r entry and that no participants may wear
	culturally appropriated clothing such as Native American headdresses.	

COMPLETE AND SIGN THE BACK OF THIS FORM

First & Last Name of Participant	Age of Participant	Signature of Participant
Signature of Parent or Guardian	Date	Address
Home Phone	Work Phone	
Parents' Health Insurance Company	Policy Number	
IN THE EVENT OF ILLNESS OR ACCONTACT:	CCIDENT AND IF UNABLE TO	O CONTACT ABOVE, PLEASE
Name	Phone	

If your son or daughter has a special medical problem, kindly attach a description and attach to this permission slip.