



PARENT PERMISSION SLIP

I hereby certify that _____ has my permission to participate in the sports program offered by Dream Arena. In case of injury to a participant in the program, I understand that Dream Arena its staff, and game officials are not legally liable for such injury or any expenses. This is a competitive sport, thus injuries may occur and will be the sole responsibility of the individual child and family who chooses to participate in the program. Furthermore, I authorize the school authorities to release information concerning the participant's age and birth date. I have read and understand Dream Arena's policy. I certify that the information I have provided on this form is correct.

Participant's Name

Team Name

Participant's School & Grade Level
(as of August 30, 2012)

Parent Signature

Date

Printed name of parent/legal guardian

Phone