



CROSSROADS CHRISTIAN SCHOOL

P.O. Box 249 ♦ Henderson, NC 27536 ♦ (252) 431-1333 Office ♦ (252) 431-0333 Fax ♦ www.ccscolts.org

STUDENT ACTIVITY RELEASE FORM 2009-10

By signing this form, I, _____, as parent or legal guardian, give permission for _____ to participate in the following activity or activities:

- Ride the mechanical bull at the Homecoming Party on January 8, 2010 at Crossroads Christian School.
- Play Bungie Basketball at the Homecoming Party on January 8, 2010 at Crossroads Christian School.

In doing so, I absolve Crossroads Christian School, its insurers, agents, employees, board, representatives, and assigns from any and all causes of actions, claims, demands, or expenses in any way connected with or arising out of said activity(ies).

Student Name (please print)

Parent/Guardian Name (please print)

Parent/Guardian Signature

Date