

Henderson Warrior Guides Program

Warrior Guide Commitment

Student Last Name: _____ First Name: _____

Graduating Year: _____ DOB: _____ Male or Female: _____

Address: _____

School Email: _____

All invitations to events will come by email as well as text. You will be asked to RSVP for the events electronically. CLEARLY print a **non-school email** that we can use in addition to the school email above.

CLEARLY PRINT Cell Phone: _____ Home Phone: _____

Parent #1's Name, Cell and Email Address: _____

Parent #2's Name, Cell and Email Address: _____

Parents will be informed electronically of upcoming events for INFORMATIONAL purposes only. Registering for the events is distinctly the responsibility of the Warrior Guide, not the parent.

Tell us some of your favorite activities and hobbies so that we can better pair you up with your Brave. The more you give us, the better we can match you up with a 5th or 6th grader who shares your interests. **If you want to be matched up with a specific Brave, please list his or her name below.**

Please let us know if you have any allergies or medical concerns:

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Warrior Guide Waiver Form

I do hereby assume full responsibility for any and all damages, injuries (including death), or losses that my child may sustain or incur, if any, while attending, practicing, participating or witnessing in any club exercise program, sport or physical activity occurring in or about the club premises or at any offsite location. I hereby assume full risk, waive all claims and release and hold B. Reed Henderson High School and the Andrew L. Hicks, Jr. Foundation, its instructors, or partners of said program or event, individually or otherwise, harmless for any and all claims for injuries or damages.

I am fully aware and understand that the club does not have on or about the club premises, or employ or contract with any medical services, provisions for ordinary or emergency medical services.

In consideration of my child's participation in and the use of the Club's facilities, I hereby release and covenant not to sue the Club, its owners, shareholders, directors, officers, employees, representatives, agents, and lessees from any and all claims resulting from any physical injury that may occur to my child while participating in any program or event sponsored by the Warrior Guides or the Andrew L. Hicks, Jr. Foundation.

I have read and fully understand the above release/waiver and fully understand that I have given up substantial rights by signing this waiver voluntarily.

Parent or guardians must sign if Warrior Guide is UNDER 18.

Student Name (print): _____ Date: _____

Student Signature: _____

Parent/Guardian Name (print): _____ Date: _____

Parent/Guardian Signature: _____

I hereby grant permission to the Warrior Guides club and the Andrew L. Hicks, Jr. Foundation to photograph my image and/or that of my minor child and to edit, crop, or retouch such photographs. I consent to permit those photographs to be used by the Warrior Guides and the Andrew L. Hicks, Jr. Foundation for any purpose, including education and advertisement purposes, and in any medium including print and electronic.

I have also read the Warrior Guides club **Description, Mission, Aims, and Expectations** and I will follow the **Rules** of the club. **There will be a MANDATORY Parent Meeting on Sunday, September 20th at 4pm at HHS in the Auditorium.**

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

_____ Parent, please check here if you are willing to serve as a Chaperone at a Warrior Guides Event this year.