## **FORM OF RELEASE**

Signature:\_\_\_\_\_\_
Date:\_\_\_\_\_

## **Student-Athlete Release and Liability Waiver**

I/We, on behalf of	(Student Athlete),		
do hereby release and hold harmless Northern Light Ea	astern Maine Medical Center,		
its employees, officers, directors and agents (collective	ely referred to as "EMMC"),	50	
from any and all liability for all losses, damages or inju	ries occurring as a result of the		
provision of the Services to Student Athlete (including	the rendering of first aid and		
emergency medical treatment) by an Athletic Trainer 6	employed by EMMC (the		Northern Light
"Athletic Trainer") and retained by RSU 22 to cover stu	udent athletic activities and		Health.
training exercises held in conjunction with SCHOOL ath	nletic events.		
I/We hereby authorize and consent to the provision of	froutine first aid and		
emergency medical treatment to Student Athlete by the	ne Athletic Trainer should the		
Athletic Trainer determine injuries require such treatm			
necessary to transport by emergency medical transport to a healthcare facility for further evaluation and			
treatment, I/we agree to pay all fees and costs associa	ted with those services.		
		1.6 .1	
I/We have read the above agreement, and voluntarily	•		-
that no oral representations, statements or inducement made.	nts apart from the foregoing writ	iten agreement	nave been
made.			
Signature of Student Athlete:			
Print Name:			
Signature:			
Date:			
Signature of Parent/Guardian (if Student Athlete und	er the age of 18)		
Print Namo			