

LIABILITY FORM

We, the undersigned parents and/or legal guardians of			
	, (studer	nt) acknowledge that:	
(1) B	uffalo Creek Boys School (BCBS)	is a non-profit, charitable institution;	
	2) that teachers and parents may volunteer their time, services and automobiles to assist with activities;		
S		l will involve the outdoors, swimming, peditions, all of which involve inherent risk	
(4) se	chool activities will involve use o	of tools and physical exertion.	
release and hereby assu Buffalo Cree from liabilit hold BCBS I including the We, the und our child an	that no other parent/guardian is me all risks associated with the rek Boys School, the teachers, staff y for all school related activities. narmless from all claims of liabilities expense of defending such claims dersigned, authorize BCBS to seed and agree to be fully and exclusive	k emergency medical care/treatment for ly responsible and guarantee payment for	
the cost of a such purpos		and grant power of attorney to BCBS for	
	day of	20	
	Mother's Signature	Father's Signature	
	Legal Gua	rdian	
Phone Num	bers:		
Contact in c	ase of emergency:		
		Name and phone number	