

OLG GOLF PERMISSION FORM AND WAIVER

My child, _____ has my permission to attend OLG Golf practices and tournaments for practices after school at OLG and at away games. I agree to instruct my child to cooperate and conform to directions and instructions of the Head Coach. I also give permission for parents to drive my child to and from practices at Alondra Park Golf Course in Torrance and relieve parents driving of any liability. Parents not driving will arrange for pickup from OLG. Parents should drive their own child to the CYO golf tournaments. I hereby give the Head Coach permission to use his judgment in obtaining medical service for my child and I give permission to the physician selected by the supervisory personnel to render medical treatment deemed necessary and appropriate by the physician. I agree to relieve OLG School and other participating adults from any liability in connection with the request. I realize that all drivers must complete Virtus training, fingerprinting, and leave a copy of current driver's license and car insurance with the school office.

Signature of Parent or Guardian:

Home Phone

Home Address

Work Phone/Cell Phone

Student Name (Please Print)

Date

PERMISSION BY PARENTS MAY NOT BE GIVEN OVER THE PHONE.