Olympika Permission Form 2018-2019		
Student Name:		School Name:
Grade:		
Gender:		
The above named student has my permission to pa SCJCL Spring Forum. I am fully aware of the risks a child to participate in these events, including the risk such injury, and I hereby allow my child to participate indemnify and hold harmless the South Carolina Jur Classical League, The South Carolina Senior Class League, Trinity-Byrnes Collegiate School and the deorganizations listed above from any loss, liability, damy child's participation in this activity. I understand to League, the National Junior Classical League, The National Senior Classical League, Trinity-Byrnes Corepresentatives of all of these organizations will not associated with any injury that my child may sustain	and hazards connected of physical injury or e in said activity. I her hior Classical League ical League, the National League, the National League, the South Carolin South Carolina Senional legiate School, and the responsible for an	d with allowing my disability as a result of reby further agree to , the National Junior anal Senior Classical res of all the ay be incurred due to a Junior Classical r Classical League, the he delegated
assessation that any injury that my simu may sustain		Parent or Guardian
Signature		-
	Date	_ Student Signature
	_ Date	Sponsor Signature