



Westfield Washington Schools Bike At School Consent Form

I hereby give my permission and consent for my child:

_____ to participate in the Bike At School Event to be held on either Wednesday, May 6, 2015 or Friday, May 8, 2015 between the hours of 7:45 am and 8:30 am. By signing this consent form, I agree to hold harmless Westfield Washington School Corporation, Shamrock Springs Elementary School, Shamrock Springs PTO, and Volunteers in the event of injury to my child or damage to my child's bicycle while participating in this event. **I also understand that my child must wear their helmet at all times and that I will be present during the event.**

Parent Signature: _____

Printed Name: _____

Date: _____

Teacher: _____ . Grade: _____

CONSENT FORMS DUE FRIDAY, MAY 1, 2015