



Lovejoy Athletic Department
Equipment Release

Student _____

Parent/Guardian _____

Detailed Description of Equipment _____

Recognizing that quality equipment is supplied for all Lovejoy Athletes, I choose to provide my child with the above-named equipment that he will utilize for all practices and games. In doing so, I release Lovejoy Athletic Department and Lovejoy Independent School District from any and all liability regarding this piece of equipment. Further, I agree that Lovejoy ISD is not responsible for damage to or maintenance of the equipment described in this document.

Parent/Guardian Signature _____

Date _____

Head Coach Signature _____

Date _____

Athletic Director Signature _____

Date _____



ATHLETICS
ONE GOAL - CHAMPIONS