



6. I expressly agree that this release of liability and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Kansas and that if any of its provisions are held to be invalid, the balance shall, notwithstanding, continue in full legal force and effect.
7. I have read this Release Agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to bring legal action or assert a claim against the School and its trustees, employees, volunteers and agents. I acknowledge that I am signing this agreement fully and voluntarily and effecting a complete and unconditional release of all liability, for myself and for Student, to the greatest extent allowed by law.

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Parent or Guardian Signature

Date

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Student Signature

Date