

JJA-FORM – PARENT CONSENT AGREEMENT FOR STUDENT ATHLETIC AND EXTRACURRICULAR PARTICIPATION

I, We, _____ am/are the parent(s) or guardian(s) of _____, a minor, who desires to participate in the following school sport or extracurricular activity: _____.

I/We acknowledge that I/We have been informed as to the nature of the sport/extracurricular activity, and that this sport/extracurricular activity may have risks of injury associated for those who participate, including transportation from and to the school campus. Although the school staff will endeavor to provide each participant with due care, the school cannot ensure that my/our child will remain free of injury.

I/We represent that my/our child is physically fit to participate in this sport/extracurricular activity and, if required, that he/she has been examined by a licensed physician who verifies that my/our child is physically fit to participate in this particular sport/extracurricular activity. The school district will rely on this representation.

I/We understand the school cannot ensure safety for children and that the schools obligation is to take reasonable precautions for safety and well being. My/Our child also has a responsibility for his/her safety and the safety of others.

I/We acknowledge that I/We must provide the athletic/extracurricular staff with any medical or other information which I/We feel is important for the school to know about our son/daughter. This information must be kept confidential. I/We will provide medical and any other information on our child prior to the start of practice or extracurricular activity. The school district will rely on me/us to provide this additional information.

I/We acknowledge my/our child must adhere to all the policies, procedures, rules, regulations, and instructions pertaining to school athletics or extracurricular activities, and that failure to comply could exclude my/our child from participation in this sport or extracurricular activity. Students shall not use, have in their possession, or be in the presence of underage/illegal substances including, but not limited to, illegal drugs, alcohol, tobacco, inhalants, and medications contrary to the manner for which they were prescribed. This policy applies to all participants and applies on or off school grounds, 24 hours a day.

I/We acknowledge receipt of the Athletic Code of Conduct and will adhere to this policy if applicable.

I/We acknowledge and understand the risks and requirements for our child to participate in the sport/extracurricular activity of _____. I/We consent to my/our child's participation in this sport/activity.

Parent _____ Parent _____

Date _____

Instructions:

1. Please read entire form. If there is anything about this form or the described activity that you do not understand, do not sign the form until you are satisfied that you have obtained a complete explanation.
2. Fill in all blanks.
3. If you have more than one child participating, complete one form per child.

APPROVED: March 22, 2007