

INTERSCHOLASTIC ATHLETICS EXHIBIT

PARENTAL PERMISSION

I have read the RULES FOR EXTRACURRICULAR ATHLETIC ACTIVITIES provided my child by the coach. I permit (student) \_\_\_\_\_ to participate in interscholastic (sport) \_\_\_\_\_ during the current season.

Date \_\_\_\_\_ Signed \_\_\_\_\_

\*\*\*\*\*

ACKNOWLEDGMENT OF RISK

We realize there is a possibility that our son/daughter could suffer severe injury including paralysis or death, as a result of participating in athletic activities.

Date \_\_\_\_\_ Signed \_\_\_\_\_

\*\*\*\*\*

STUDENT'S PERMISSION TO LEAVE SCHOOL GROUNDS 8TH PERIOD

Note: For Juniors and Seniors *only* !

My son/daughter has \_\_\_\_\_, has not \_\_\_\_\_ my permission to leave school property during 8th period (2:30 pm - 3:15 pm) providing he/she has no academic commitments.

Date \_\_\_\_\_ Signed \_\_\_\_\_

\*\*\*\*\*

STUDENT'S AGREEMENT

I understand the RULES FOR EXTRACURRICULAR ATHLETIC ACTIVITIES distributed and explained to me by the coach. I am aware of the academic eligibility requirements. I understand the inherent RISK OF INJURY when participating in athletic activities.

Date \_\_\_\_\_ Signed \_\_\_\_\_  
(Student)

Return to: \_\_\_\_\_

Adoption date: April 17, 2007