

Paton-Churdan Community School
Student Participation Form
2018-19 School Year

Parent/Guardian Permission Form

I hereby give my consent for my son/daughter to represent his/her school in athletic activities and to accompany any school team of which he/she is a member on any of its local or out-of-town trips. I authorize the school to obtain, through a physician of its choice any emergency medical care that may become reasonably necessary for the student in the course of such athletic activities or such travel. Note – The school will make every attempt to make use of the health and injury information card. I also agree to not hold the school or anyone acting in its behalf responsible for any injury occurring to the above named student in the course of such athletic activities or such travel.

I have read the eligibility rules and regulations of participation and fully understand them. I further understand that should there ever be a time whereby either my son/daughter or the school is not in accordance with these guidelines, I may request a conference within three calendar days of such time with school personnel (activities director, principal, and/or coach) to discuss the matter further.

Students covered under this participation form:

Date

Parent/Guardian Signature

Insurance

Our son/daughter is covered by _____ insurance company.