

ATHLETIC PARTICIPATION, INSURANCE, AND CONSENT FORM PLEASE PRINT

Name _____

Male ____ Female ____

Address _____

The student is domiciled at the above address located in the _____ Cobb County School District. (School must be notified if student moves from the above address) Have you attended this Cobb County school for at least one full school year? Yes ____ No ____

You live with (Name of Parent/Parents/Guardian) _____ Date of Birth _____

Home Phone: _____ Cell Phone: _____

Grade level for the 2013-2014 _____

PARENTAL CONSENT FOR ATHLETIC PARTICIPATION WARNING:
Although participation in supervised inter-scholastic athletics and activities and intra-scholastic athletic clubs and activities may be one of the least hazardous in which students will engage in or out of school, **BY ITS NATURE, PARTICIPATION INTRA-SCHOLASTIC SPORTS CLUBS INCLUDES A RISK OR INJURY WHICH MAY RANGE IN SEVERITY FROM MINOR TO LONG TERM CATASTROPHIC, INCLUDING PERMANENT PARALYSIS FROM THE NECK DOWN OR DEATH.** Although serious injuries are not common in supervised athletic programs or athletic clubs, it is possible only to minimize, not eliminate this risk. Participants can and have the responsibility to help reduce the chance of injury. **PARTICIPANTS MUST OBEY ALL SAFETY RULES, REPORT ALL PHYSICAL PROBLEMS TO THEIR COACHES OR CLUB SUPERVISORS, FOLLOW A PROPER CONDITIONING PROGRAM, AND INSPECT THEIR EQUIPMENT DAILY.** By signing this permission form, you acknowledge that you have read and understand this warning. **PARENTS OR STUDENTS WHO DO NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS PERMISSION FORM.**

I (We) hereby give consent for _____ to:

(1) Compete in athletics at _____ of the Cobb County School District

(2) To accompany any school team or sports club of which the student is a member on

any of its local or out-of-town trips;

(3) and, I hereby verify that the information on this form is correct and understand that any false information may result in my son/daughter being declared ineligible.

(4) Students found illegally enrolled out of their school attendance zone could be ruled ineligible for competition for one 1 full year.

(5) Parents should contact Coach for information regarding injuries to their son/daughter. This acknowledgement of risk and consent to allow participation shall remain in effect until revoked in writing.

_____ Signature of Parent (Guardian)

Date: _____

Signature of Student Athlete Date
