

Chickamauga Elementary School

Interscholastic Parent Consent and Agreement

We give permission for _____ to participate in _____ (Activity). We will encourage and assist her/him in being a leader that will bring credit to Chickamauga Elementary School. We also understand that there may be certain financial obligations that we must fulfill in order for her/him to participate.

It is further understood that should any situation arise which is not covered in the rules, a binding decision will be made by the sponsor/coach and principal.

We have discussed the accompanying rules and regulations with our son/daughter and understand that failure to follow them or other directions given by the sponsor/coach can lead to dismissal or suspension from the squad.

We understand that there is an inherent risk of injury involved in athletic participation. We accept this warning of risk and agree to permit participation.

We authorize the sponsor/coach to act on our behalf in arranging for medical treatment as may be deemed necessary by the physician and/or hospital. We also accept responsibility for payment of service rendered beyond that provided by insurance.

We further give permission for our son/daughter to be transported by school vehicles on the activity dates to which this consent applies. We agree to hold Chickamauga Elementary School, sponsor/coach, chaperone(s), and the Chickamauga Board of Education free from liability for injury or sickness that might occur.

Parent's Signature _____ Date _____

Student's Signature _____ Date _____

School Insurance Yes _____ No _____

Private Policy _____ Policy # _____

In case of emergency, notify: (list two)

_____ Phone _____

_____ Phone _____

Any allergies or medical problems _____

