

CENTERBURG LOCAL SCHOOLS
RULES OF ATHLETIC PARTICIPATION
INFORMED CONSENT AGREEMENT

Student Name: _____ Grade: _____
(Please Print)

AS A STUDENT:

I understand and agree that participation in athletic activities is a privilege that may be withdrawn for violations of the Rules of Athletic Participation, hereinafter Participation Rules.

I have read the Participation Rules and thoroughly understand the consequences that I will face if I do not honor my commitment to the Participation Rules.

I understand and realize that there is risk of injury in participating in athletic activities.

I understand that when I participate in any athletic program, I will be subject to random and reasonable cause drug testing while in or out of season, and, if I refuse, I will not be allowed to practice or participate in any athletic activities for one calendar year. I have read the consent on the reverse of this form and agree to its terms.

I understand this agreement is binding while I am a student at Centerburg.

Student Signature Date

AS A PARENT/GUARDIAN/CUSTODIAN:

I have read the Participation Rules and understand the responsibilities of my son/daughter/ward as a participant in athletic activities at Centerburg.

I pledge to promote healthy lifestyles for all student athletes of the Centerburg Schools.

I understand and realize that there is an assumed risk of injury involved for my son/daughter/ward as a participant in athletic activities.

I understand that my son/daughter/ward, when participating in any athletic program, will be subject to random and reasonable cause drug testing **while in or out of season**, and, if they refuse, will not be allowed to practice or participate in any athletic activities **for one calendar year**. I have read the consent on the reverse of this form and agree to its terms.

I understand this agreement is binding while my son/daughter/ward is a student at Centerburg.

Parent/Guardian/Custodian Signature Date

Parent/Guardian/Custodian Name (print) Home Phone Work Phone

READ CONSENT TO PERFORM URINALYSIS FOR DRUG TESTING ON REVERSE SIDE