

MIDDLE SCHOOL  
ATHLETIC PARTICIPATION  
Information and Permission

STUDENT'S NAME \_\_\_\_\_ GRADE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

PARENT OR GUARDIAN'S NAME \_\_\_\_\_

Telephone number where parent or guardian may be reached in case of emergency: \_\_\_\_\_

In case of emergency, what physician should be called?

Physician's name: \_\_\_\_\_ Telephone: \_\_\_\_\_

If you have no physician, would you authorize the principal or his/her representative to contact any licensed physician acceptable to the school district?  Yes  No

Insurance requirements: Students participating in athletics are required to be covered by insurance, either by a family plan or one that is available through the school district. Our son/daughter will be covered by the following insurance plan.

Name of insurance company: \_\_\_\_\_

In order to confirm your child's health status, the following information is required:

1. Family records indicate this student's last physical examination was: Date \_\_\_\_\_, 20 \_\_\_\_\_.

2. Has your child had any serious accidents, illness, and/or injuries since the last physical exam?  Yes  No

If 'yes,' please indicate what:

\_\_\_\_\_

If your answer to No. 2 is 'yes,' then a physician's clearance is required in order for your child to participate in athletics during this school year.

3. Is there anything unique related to your child's physical fitness which the school should know?  Yes  No

If 'yes,' please indicate what:

\_\_\_\_\_

4. I hereby give consent for my child to participate in all sports offered in the school.  Yes  No

5. If the answer to No. 4 is 'no,' I give consent for my child to participate only in those sports indicated next to my signature.

Basketball \_\_\_\_\_ Football \_\_\_\_\_

Cross Country \_\_\_\_\_ Volleyball \_\_\_\_\_

Track \_\_\_\_\_ Wrestling \_\_\_\_\_

I give permission for my child to be transported by Salem-Keizer Public Schools to any event in which he/she is participating as a team member.

\_\_\_\_\_  
PARENT OR GUARDIAN DATE

DISTRIBUTION: WHITE—Coach  
CANARY—School office  
PINK—Parent/student

Salem-Keizer Public Schools promotes equal opportunity for all individuals without regard to age, color, disability, marital status, national origin, race, religion or creed, sex or gender, sexual orientation, or veteran status.