

Informed Consent Form

I hereby give my permission for my child, _____
to participate in _____ during the athletic season beginning in
_____. Further, I authorize the school to provide emergency treatment of any injury or illness my child may
experience if qualified medical personnel consider treatment necessary and perform the treatment. This authorization is
granted only if I cannot be reached and a reasonable effort has been made to do so.

Date _____ Parent or guardian _____

Address _____ Phone () _____

Family Physician _____ Physician's Phone: _____

Medical conditions (e.g., allergies or chronic illnesses) _____

Other person to contact in case of emergency _____

Relationship to student _____ Phone: _____

My child and I are aware that participating in _____ is a potentially hazardous activity. I assume all
risks associated with participation in this sport, including but not limited to falls, contact with other participants, the
effects of the weather, traffic, and other reasonable risk conditions associated with the sport. All such risks to my child
are known and appreciated by me.

I understand this parent consent form and agree to its conditions on behalf of my child.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Emergency Information Card

Athlete's Name _____ Age _____

Address _____

Telephone # _____ SSN# _____ Sport _____

List two persons to contact in case of emergency:

Parent/Guardian _____

Home # _____ Cell # _____

Address _____

#2 Parent/Guardian _____

Home # _____ Cell# _____

Address _____

Relationship to Athlete _____

Insurance Co. _____

Family Physician _____

Medical conditions (IMPORTANT) _____

Is the student allergic to any drugs? If yes, which one(s)? _____

Does the student suffer from: Asthma _____ Diabetes _____ Epilepsy _____ Check any that apply

Is the student on any medications? If yes, please list: _____

Does the student wear contacts: Yes _____ No _____ Other information: _____
(Continue on back if necessary)

Parent Signature _____ Date _____