

# WEYMOUTH HIGH SCHOOL ATHLETICS 2018-2019 PARENT/GUARDIAN CONSENT FORM

## UNIFIED SPORTS

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Year of Graduation: \_\_\_\_\_/PG

### PARENT/GUARDIAN CONSENT STATEMENT:

I the undersigned parent/guardian of the student-athlete listed above give my permission for my son/daughter to participate in interscholastic sports at Weymouth High School. I also give my consent for him/her to accompany the team on all team related trips. I give this consent with the understanding of the inherent risks of athletic activities and agree to release and hold harmless the Town of Weymouth and the Weymouth School Department and all employees, for all claims arising from my son/daughter's participation.

In the event of an accident or emergency I also give my permission for the school athletic trainer, team physician, coach or E.M.T. to render necessary medical aid. I am not aware of any condition that would prevent my child from participating in athletics and acknowledge that my child has had a physical within the past twelve months. In the event of a sports-related injury I will report the injury to the school trainer within twenty four hours.

My son/daughter and I have read and understand the MIAA and Weymouth Athletic rules set out in the WHS Student Handbook , specifically the rules related to academics, chemical health, school citizenship and the policy against hazing and bullying. With this knowledge we agree to abide by the rules and regulations contained therein.

I understand that the user fee, as determined by the Weymouth School Committee, is due at the start of the season. The minimum fee is \$50 for Unified Sports. If there is a financial hardship, you may request a waiver or a payment plan through the Principal's office. This fee does not guarantee playing time, but does allow for daily participation in a positive, educational setting where many life lessons and skills are learned and developed. If a student leaves a team voluntarily or is removed from the team for disciplinary or scholastic deficiencies they are not eligible for a refund.

I hereby give my daughter/son permission to participate in competitive athletics at Weymouth High and to take part in the WHS Strength and Conditioning Program.

\_\_\_\_\_  
*Parent or Guardian Signature*

\_\_\_\_\_  
*Date*

I have read, understand, and accept the responsibility of abiding by school rules set forth for student athletes in the WHS Weymouth Student Handbook. I specifically agree to adhere to the WHS anti-hazing and anti-bullying policies as set forth in my copy of the Student Handbook.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

### Emergency Contact Information:

Parent/ Guardian: \_\_\_\_\_ Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Alternative: \_\_\_\_\_