



**ATHLETIC PARTICIPATION FORM | PARENTAL PERMISSION FOR PARTICIPATION**

Your signature below indicates that you have read and agree to the following warnings and conditions:

WARNING: Although participation in supervised interscholastic athletics and activities may be one of the least hazardous in which any student will engage in or out of school, BY ITS NATURE, PARTICIPATION IN INTERSCHOLASTIC ATHLETICS INCLUDES A RISK OF INJURY WHICH MAY RANGE IN SEVERITY FROM MINOR TO LONG-TERM CATASTROPHIC INJURY and perhaps FATAL ACCIDENTS. Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate this risk.

Players must obey all safety rules, report all physical problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily.

By signing this Permission Form, we acknowledge that we have read and understood the above warning and conditions. Parents or students who do not wish to accept the risks described in this warning should not sign this permission form.

I hereby give my consent for \_\_\_\_\_ to compete in athletics for George Washington High School in Colorado High School Activities Association approved sports. I have read and understand the general guidelines for eligibility.

STUDENT SIGNATURE:

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STUDENT NAME:

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PARENT / GUARDIAN SIGNATURE

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PARENT / GUARDIAN NAME:

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