



CHARLES COUNTY PUBLIC SCHOOLS

JAMES E. RICHMOND
Superintendent of Schools

RONALD G. CUNNINGHAM
Associate Superintendent
of Schools

Authorization for Participation in Interscholastic Athletics

As parents or legal guardians of _____, we hereby authorize and consent to our child's participation in interscholastic athletics and sports. We understand that the sport in which our child will be participating is potentially dangerous and that physical injuries may occur to our child requiring emergency medical care and treatment. We assume the risk of injury to our child that may occur in an athletic activity. We also understand that we must complete a form which is a Verification of Medical Insurance/Permission to Obtain Medical Treatment for Interscholastic Sports Program. We agree to hold harmless the Board of Education of Charles County, its members, the Superintendent of Schools, the principal, all coaches, and any and all other of their agents and agree to indemnify each of them from any claims, costs, suits, action judgements, and expenses arising from our child's participation in interscholastic athletics and sports and any injuries received therefrom and expenses related thereto.

Students who have elected to participate in the athletic program will be required to practice and participate in scheduled contests after regular school hours and possibly on non-school days. Supervision to practice, games and travel will be provided by the school.

In addition, all students/athletes must comply with eligibility regulations that govern athletics in the Charles County Public Schools as issued by the Board of Education of Charles County and Maryland Public Secondary Schools Athletic Association and the Maryland State Department of Education.

I also declare and affirm that my child resides within the attendance area of _____ or is attending _____ with the permission of the Student Services of Charles County Public Schools. If a student is attending a high school without the benefit of residing* within the school's attendance area and/or approval of the School Change Request procedure, the student in question is subject to disciplinary action which could result in the loss of athletic eligibility for a period of time as governed by the regulations of the Charles County Public Schools Interscholastic Handbook.

I/we understand and agree to all of the above.

Parent or Legal Guardian

Street Address

Date

City Zip Code

*Residing means with parents or legal guardian/custodian.

JAMES H. CORNETTE
Assistant in School Administration and Operations

PATTY L. DORSEY
Assistant in School Administration and Operations

KEITH G. GRIER
Director of Pupil Services

