

# Windham-Ashland-Jewett Central School Informed Consent & Parental Permission for Athletic Participation

As the parent(s) of \_\_\_\_\_, I/We hereby grant him/her  
(Student Athlete)  
permission to participate in \_\_\_\_\_ during the \_\_\_\_\_ school year.  
(Name of Sport) Year of Participation

In addition, as parents, we are aware of the possibility of serious injury inherent in, athletic participation, and we are familiar with the dangers involved in this sport. We, consent to our son/daughter participating in this sport and hereby full agree to these conditions.

_____	_____	_____
Sport	Parent/Guardian Signature	Date

We understand that in case of an injury or illness, the quickest medical assistance will be summoned and first aid administered. We can be reached at the following numbers:

Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

You, as coach, should be aware of the following special information or instructions regarding my son's/daughter's medical history or condition:

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