

ATHLETIC PARTICIPATION CONSENT AND LIABILITY DISCLOSURE

I understand that my child is required to have a physical examination **completed prior to try-outs**, practice, and competition in high school interscholastic programs at Springville High School. This exam is at the expense of the student/parent/guardian and may not be taken prior to **March 1st** immediately preceding entry into the high school fall athletic program. **I understand that a physical exam is required for EACH consecutive year of participation. Documentation on the Springville High School Pre-participation Exam and Medical History Form is required.**

The safety and well being of students is our greatest concern at Nebo School District. Every reasonable effort is made to ensure that activities are conducted in a safe manner. However, athletic participation carries with it certain unavoidable, unpredictable, and inherent risks and dangers that no amount of care, caution, or instruction can eliminate. The student and parent/legal guardian consent to the participation of the student in Nebo School District athletic activities.

Participation in junior high or high school athletics is an extreme test of a person's physical and mental limits and carries with it the potential for serious injury, property loss, or even death. The risks include, but are not limited to, those caused by the physical condition of the athlete, terrain, facilities, water conditions, lack of hydration, temperature, weather, condition of equipment, vehicular traffic, and actions of other people including coaches, participants, spectators, volunteers, event officials, and others. We, the undersigned, hereby acknowledge the risks of participating in these athletic activities. By signing below, we certify that the student is physically fit and has not been advised otherwise by a qualified medical person.

The undersigned, student, and parent/legal guardian, in consideration of having the student participate in the athletic activities, hereby release, indemnify, and hold harmless Nebo School District and its schools, employees, agents, and other participants of and from any and all claims, liabilities, and expenses (including attorneys' fees) arising from death, personal injury, illness, property damage, theft, and other losses arising directly or indirectly from the student's participation in the athletic activities.

STUDENT AGREEMENT REGARDING CONDITIONS FOR PARTICIPATION

I hereby state that I have read and agreed to abide by the Extra-Curricular Activity Guidelines found in the Student Handbook. I understand that to participate in athletics at Springville High School I must live within the school's boundaries or have been approved for Open Enrollment. I also understand that if I do not meet the citizenship, academic, and attendance standards set by the school it will result in me not being allowed to participate in contests either temporarily or permanently. **I have not repeated any grades in school.**

I have completed and/or verified the part of the medical history, which requires me to list all previous injuries or additional conditions that are known to me which may affect my performance in so representing my school, and I verify that it is correct and complete. I also agree to follow all protocols and rules as set by the school/district for my athletic participation.

If, between this date and the beginning of athletic competition, any illness or injury should occur that may limit my participation, I agree to notify the school athletic trainer of such illness or injury as soon as possible but within no longer than 10 days.

INSURANCE INFORMATION/MEDICAL RELEASE

Participation in junior high or high school athletics has many rewards and provides opportunity for growth, skill development and enjoyment. However, it is important that both the participant and the parents/legal guardians realize that an element of physical risk is present when one is involved in athletics. The purpose of this form is to clarify some issues regarding health and accident insurance, and to obtain permission to secure appropriate medical assistance in the event that your son/daughter should be injured.

Nebo School District insurance does not cover personal injury that is the result of athletic participation. The Utah High School Activities Association (UHSAA) does provide catastrophic insurance coverage but it is secondary in nature and is subject to a \$25,000 deductible. It covers events that are sanctioned by the UHSAA as well as approved travel to and from those events. It also covers supervised practices and direct travel pertaining to those practices. **It is important that you check with your own insurance carrier to be certain that athletic injuries to the student would be covered by your own policy.**

Nebo School District's insurance policy does cover injuries that result from an accident incurred with school transportation going to or from practice or game sites. Students who choose to provide their own transportation to game or practice sites must carry their own insurance coverage.

I hereby give my permission to the proper authorities of a team sponsored by Nebo School District or any Nebo School District schools to seek appropriate medical assistance for my son/daughter in the event of any injury. School/team officials will attempt to contact me before arranging any outside medical care unless the situation demands immediate emergency care. I understand that neither the school nor Nebo School District has responsibility for the payment of the medical costs incurred in the event of an athletic injury. I also consent to have my son/daughter transported by a Nebo School District employee or by ambulance in the event of illness or injury. I hereby represent and warrant that I am duly authorized to execute this document.

PARENT PERMISSION AND AUTHORIZATION FOR TREATMENT

As a parent/guardian, I hereby give my consent for the above student to represent his/her school in extra-curricular activities at Springville High School. I also give consent for him/her to travel to and from athletic contests and practice sessions and will not hold the school responsible in case of accident or injury whether it be enroute to or from an event or during practice or an extra-curricular activity.

I understand that there is risk involved in participating in high school athletics. I further realize that potential injuries may be severe in nature and may lead to accident or death. I give my consent for treatment deemed necessary by any physician, athletic trainer, nurse, or school representative for any illness or injury resulting from his/her participation.

I confirm that this application for the above student is made with the understanding that we (my student and I) have studied and understand the Extra-Curricular Activity Guidelines found in the Student Handbook and that he/she has not violated any of them. I have completed and/or verified the part of this certificate which requires my child to list all previous injuries or additional conditions that are known which may affect my child's performance in so representing the school, and I verify that it is correct and complete. I also agree to follow all protocols and rules as set by the school/district for my child's athletic participation.

I take full financial responsibility for any injuries which may occur to my child during his/her participation in high school activities.

I understand that my child is required to have a physical examination completed prior to try-outs, practice, and competition in high school interscholastic programs in the state of Utah. This exam is at the expense of the student/parent/guardian and may not be taken prior to **March 1st** immediately preceding entry into the high school fall athletic program. **I understand that a physical exam is required for EACH consecutive year of participation.**

By E signing this document we verify that we have read and understand the instructions on this form and will comply with such.