

HENDERSONVILLE ROYALS

2017-18 Parent's Consent Form

Please read and review carefully. For participation, sign and submit.

Student: _____

Grade: _____

1. Liability Release:

I, the parent or legal guardian of the above student, agree and consent his/her participation in the Hendersonville Royals' athletic activities and hereby release the school, its agents, assigns, employees, and other assistants and representatives from any liability whatsoever arising out of injury, sickness, or damages sustained while participating. Also, the Hendersonville Royals does not carry a secondary athletic insurance for players. All athletes must carry their own medical insurance to be eligible to participate in any of our athletic teams and/or activities.

2. Medical Release:

In the event of an emergency, I, the parent or legal guardian of the above student, agree and consent for emergency personnel, and/or Hendersonville Royals' agents, assigns, employees, and other athletic assistants or representatives to secure the administration of medical treatment or medications for the above student and further agree to the performance of such treatment, anesthetics, and operations as deemed necessary by the attending medical/dental professional physicians.

3. Consent to Travel:

I, the parent or legal guardian of the above student, agree and consent for him/her to accompany the Hendersonville Royals' sports teams as they travel to a sport activity, and hereby release the school, its agents, assigns, employees, and other assistants or representatives from any liability whatsoever arising out of injury, sickness, or damages during said trips.

4. Disciplinary Agreement:

I, the parent or legal guardian of the above student, agree that above student is responsible to abide by the rules of conduct and regulations of said athletic activities and consent that the agents, coaches, or other school representatives have the option of applying responsible discipline, or dismissal from participation of said activities. It will be our responsibility, the parent of legal guardian, to assume the costs of returning above student home from the athletic activity (should that be the case) and agree to forfeit refunds from said events.

5. Policy Manual:

I have read and agreed to abide by the rules and regulations included in the Hendersonville Royals' athletic policy manual.

Parent / Legal Guardian's Name (please print): _____

Cell Phone: _____

Work Phone: _____

Other Contact: _____

Cell Phone: _____

Family Doctor: _____

Insurance Co: _____

Parent/ Legal Guardian's Signature: _____