

ACKNOWLEDGEMENT OF RISK

There is a risk of injury that comes with participation in athletics. The degree of seriousness or the risk and the type of possible injury varies with the sport or activity. Injuries could possibly range from concussions, broken bones, sprains, or even more serious conditions, such as death. These injuries may occur despite the best possible rules, measures of protection, instruction and coaching.

Having read this form and explained	this to my son/daughter,
I,	_(Print-parent or guardian name), hereby give my consent for
my child to participate in athletics at	School.
Parent/Guardian (Signature)	Date
Student Athlete (Signature)	

*To help offset the cost of accidents which may occur while participating in athletics, you may wish to consider electing to purchase voluntary student accident insurance which is available under the Caddo Web Site. Parents are responsible for electing coverage for each child and for all premiums associated with the student accident insurance. For more information on the student accident insurance, go to the Caddo Web Site, click on Forms, go to page 2 of Forms, and click on Student Accident Insurance.