

MEAD ATHLETIC PACKET

FORM REQUIREMENTS FOR PARTICIPATION IN SPORTS

IMPORTANT: Students may NOT participate in any athletic practice or event without accurate and full completion of the following forms.

1) Pre-Participation Physical Evaluation

IMPORTANT ➡ Make and keep a copy of your completed doctor signed physical form.

- a) Fully completed
- b) Doctor/Healthcare provider printed name, signature, phone number, and date
- c) Student signature
- d) Parent/guardian signature and date

2) Parent or Guardian Consent

- a) Student name printed at top
- b) Eligibility Yes/No boxes checked
- c) Parent/guardian signature and date
- d) Student signature, date, birth date, and grade

3) Concussion & Head Injury Information Release

- a) Student printed name, signature, and date
- b) Parent/guardian printed name, signature and date

4) Insurance Information and Parent/Guardian Medical Consent

Parent/Guardian Medical Consent:

- a) Student printed name on line in top paragraph
- b) Parent/guardian signature, date, and requested phone numbers & info
- c) Emergency contact info completed

Insurance Information:

- d) Student name printed at top
- e) One of the three choices marked
- f) Parent/guardian signature and date

