



ATHLETIC PARTICIPATION FORM

This form must be on file with the Athletic Director prior to a student participating in any sport.

Student Name _____ Grade: _____

PARTICIPATION PERMISSION STATEMENT

Initial box and sign below

I/We request that _____ be allowed to participate in organized middle or high school athletics, realizing that such activity involves the potential for injury -- sometimes serious and disabling -- which is inherent in all sports. I/We also acknowledge that I/we have read the rules and policies regarding academics, conduct and training contained in the LTS Student-Parent Handbook, and understand that if my child violates these rules, consequences may include suspension and dismissal from participation.

CONCUSSION INFORMATION

Initial box and sign below

It is crucial that students and parents are as aware as possible about concussions. Long Trail School provides required information on concussions at www.longtrailschool.org and as handouts.

I acknowledge that Long Trail School provides information on concussions.

Parent signature

Student signature

Date