

## Mount Prospect School District 57 Agreement to Participate

Each student and his or her parent/guardian must read and sign this *Agreement to Participate* each year before being allowed to participate in interscholastic athletics. The completed *Agreement* should be returned to the school front office.

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|---|---|--|
| Student name (printed)  |   |  |
| 1. I wish to participate in the interscholastic athletics offered at  | Lincoln Middle School.  |  |
| <ol> <li>I acknowledge reading the eligibility requirements as listed in<br/>student conduct expectations document and of any group or<br/>athletic activity in which I want to participate and I agree to a</li> </ol>   | association sponsoring any  |  |
| Before I am allowed to participate, I must: (a) provide the sch<br>Illinois Certificate of Child Health Examination; (b) have accid<br>(c) complete all forms required by any association sponsoring<br>activity including: Authorization for Medical Treatment, Certiff<br>Participation in Athletics, and Concussion Information Sheet;<br>or have made payment arrangement.  | dent insurance coverage; and g the interscholastic athletic icate of Physical Fitness for   |  |
| <ol> <li>I agree to abide by all conduct/safety rules and will behave in<br/>agree to follow the coaches' instructions, playing techniques,<br/>addition, I agree to return the sport uniform (if any) and agree<br/>uniform is not returned.</li> </ol>  | , and training schedule. In   |  |
| 4. I understand that Board policy 7:305, Student Athlete Concurrequires, among other things, that a student athlete who exhibehaviors consistent with a concussion or head injury must be competition at that time and that the student will not be allow until he or she has successfully completed return-to-play and including having been cleared to return by the treating physic medicine in all its branches in Illinois.  | ibits signs, symptoms, or<br>be removed from practice or<br>red to return to play or practice<br>d return-to-learn protocols,   |  |
| 5. I am aware that with participation in sports comes the risk of degree of danger and seriousness of risk vary significantly frecontact sports carrying the highest risk. I am aware that partiathletics involves travel with the team. I acknowledge and acathletics in which I will be participating and in all travel involvits employees, agents, coaches, School Board members, and all Liability, actions, claims, or demands of any kind and arise by or in connection with my participating in the school-sathletics. The terms hereof shall serve as a release and assuestate, executor, administrator, assignees, and for all members. | om one sport to another with cipating in interscholastic cept the risks inherent in ed. I agree to hold the District, d volunteers harmless from any nature whatsoever that may sponsored interscholastic umption of risk for my heirs, |  |
| Student Signature   | Date  |  |

## To be read and signed by the parent/guardian of the student:

- 1. I am the parent/guardian of the above named student and give my permission for my child or ward to participate in all interscholastic athletics. I have read the above *Agreement to Participate* and understand its terms.
- 2. I understand that all sports can involve many risks of injury, and I understand that the degree of danger and seriousness of risk vary significantly from one sport to another with contact sports carrying the higher risk. I am aware that participating in sports involves travel with the team. In consideration of the School District permitting my child to participate, I agree to hold the District, its employees, agents, coaches, Board members and volunteers harmless from any and all liability, actions, claims or demands of any kind and nature whatsoever that may arise by or in connection with the participation of my child in the sport(s) or athletics. I assume all responsibility and certify that my child is in good physical health and is capable of participation in the above indicated sport or athletics.

| Parent/Guardian Signature        | Date |             |
|----------------------------------|------|-------------|
|                                  |      |             |
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