

Sport participating in: _____

Tyngsboro Middle School
Athletic Permission Form

Dear Parent/Guardian:

By completing this form, I give permission for my child to participate in the above sport sponsored by Tyngsborough Middle School.

Student's Name: _____

Telephone Numbers: *HOME*: _____

Mother's WORK: _____ *Cell*: _____

Father's WORK: _____ *Cell*: _____

In the event of an emergency, the following person should be notified if parents are unreachable.

Name: _____ *Phone*: _____

Doctor's Name: _____

Doctor's Phone: _____

Preferred Hospital: _____

If your child needs emergency medical treatment and you cannot be reached, do you give permission for your child's physician or a duly licensed physician if your child's physician is unavailable, to treat your child?

YES _____ NO _____

If your child needs any type of medication brought with him/her, please indicate below and send in a signed note for the coach to be permitted to administer this medication.

YES _____ NO _____

Is there any medical condition (allergy, etc...) that the trainer and coach should be aware of?

Parent's Signature

Date

**CONSENT AND RELEASE FORM
FOR ALL VOLUNTARY ATHLETIC, TRAVEL OR RECREATIONAL PROGRAMS**

I, _____, the undersigned parent/legal guardian
(print your name) (circle one)

of _____), my child, a minor, do hereby consent
(print student name)

to my child’s participation in voluntary athletic, travel or recreational programs of the Tyngsborough Public Schools of Tyngsborough, Massachusetts.

I also agree to forever release the Tyngsborough Public Schools, Town of Tyngsborough, the School Committee, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic, travel or recreational programs of the Tyngsborough Public Schools (“the Releasees”) from any and all claims, rights of action and causes of section that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child’s participation in the Tyngsborough Public Schools voluntary athletic, travel or recreational programs.

I also promise, to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child’s participation in the Tyngsborough Public Schools voluntary athletic, travel or recreational programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child’s participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the Tyngsborough Public School’s athletic, travel or recreational programs with full knowledge that the “Releasee” will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Tyngsborough Public School athletic, ravel or recreation programs.

Signature: _____ Date: _____

Parent or Guardian of: _____
(print student name)