

BOCA RATON CHRISTIAN SCHOOL

PERMISSION/RELEASE FORM FOR STUDENT PARTICIPATION IN COMPETITIVE SPORTS

MEDICAL INFORMATION FOR: _____ (Student's Name- PLEASE PRINT)
Check One: _____ Home school student _____ BRCS Student (Please pick up home school form in the school office.)
Social Security Number _____

Parent(s) Name _____

Home Phone _____ Work Phone (Father) _____ (Mother) _____

Student's Physician _____ Phone _____

Emergency Contact Person _____ Phone _____

Student's Birth date _____ Serious Illness _____

Allergies _____ Medication _____

Health Insurance Co. _____ ID Number _____

Hospital Preferred _____

CONSENT AND WAIVER

*I, the undersigned parent, and I, the student, understanding that there is a potential for injury when participating in competitive sports, do hereby consent to the participation of my (son/daughter) _____
Grade _____ in the sport of _____.*

I represent that he or she is in good physical health and that I am unaware of anything that would adversely affect my child's ability to participate in the sport. I expressly assume the risk that may be associated with this sport and acknowledge that Boca Raton Christian School cannot reasonably foresee or prevent every possible injury or circumstance that may give rise to an injury when participating in the sport.

In the event that any emergency medical procedures or treatment are required during the child's participation in the aforementioned sport, I give consent to the coach or other representative of the School arranging for or consenting to medical procedures or treatments.

I agree, as a parent or guardian, that our personal insurance coverage will be the primary insurance carrier in the event of a non-vehicular accidental injury. The insurance carrier for the vehicle will be the primary carrier in the event of a vehicular accidental injury.

I also give my permission for my (son/daughter) to ride to and from school sporting events on the transportation provided by the school unless other arrangements have been made. I also understand that if there are games on Saturday's, games played in the evening, or tournaments, that I will be responsible for transportation to those games.

Date _____

Parent's/Guardian's Signature _____

Student's Signature _____