

POND ROAD MIDDLE SCHOOL

Robbinsville Township Schools

Permission for Athletic Participation

Name of Athlete _____ Grade _____

Sport _____

I give permission for my child _____ (student's name) to participate on the Pond Road Middle School Athletic Team as fostered and promoted under the rules and regulations adopted by NJSIAA adopted to and adhered by the Robbinsville Township School District for the **2016-2017** school year. In granting this permission, it is understood that customary trips, athletic practices, games and the like are among the approved voluntary interscholastic athletic activities.

Realizing that such activities involve the potential for injury, I acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of rules, injuries are still a possibility. On rare occasions these injuries can be disabling and life threatening.

I do hereby accept full responsibility for his/her acts while so engaged in the above named sport. I hereby specifically release the Robbinsville Township School District, its staff and members of its Board of claims or liability for personal injury known or unknown and injuries to property, real or personal, caused by, occurring in connection with, or arising from the above described school activity.

I hereby give my permission that in case of an emergency, _____ (student's name) may be taken to the hospital for treatment.

I, the undersigned, have read this release and understand all of its terms. I execute it voluntarily with full knowledge of its significance.

Signature of Parent/Guardian

Date