

Elk County Catholic High School Athletic Department

Acknowledgement of Risk and Consent

I/We hereby acknowledge that participation in Elk County Catholic Athletics involves a risk of injury, which may include severe injuries, possible paralysis, permanent disability, or death, and that these injuries may occur in some instances as the result of unavoidable accidents. I/We accept these risks in giving consent to participate in Elk County Catholic Athletics.

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I/We hereby authorize the school personnel to transport my/our child to a physician's office and/or emergency room for treatment in the event that medical care is needed while he/she is involved in Elk County Catholic Athletics. Furthermore, we authorize the physician and hospital staff to treat our son/daughter as they deem necessary in the emergency situation.

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I/We hereby authorize Elk County Catholic High School to transport my/our child to away and in some situations home athletic events. Transportation may include school or coach bus, school owned van, rental van or rental car, or private vehicle.

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I/We hereby give permission to the NATA Certified Athletic Trainer, contracted by Elk County Catholic High School, to perform immediate care and emergency treatment to injuries incurred during any interscholastic or intramural activity. I/We also give permission to administer the IMPACT concussion test.

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I/We hereby accept responsibility to insure that any prescription medication, epi-pen, inhaler, or other personal medical products that may be needed for practices or games be properly marked in its original container and placed in the "team's medical kit" for immediate use by the student when necessary.

_____ (Print Athlete's Full Name)	_____ (Grade)	Month ____ Day ____ Year ____ (Athlete's Date of Birth)	
_____ (Athlete's Signature)	_____ (Date)	_____ (Cell Phone #)	_____ (Home Phone #)
_____ (Father's or Guardian's Signature)	_____ (Date)	_____ (Cell Phone #)	_____ (Alternate Phone #)
_____ (Mother's or Guardian's Signature)	_____ (Date)	_____ (Cell Phone #)	_____ (Alternate Phone #)