



PERMISSION TO PARTICIPATE IN EXTRACURRICULAR ACTIVITIES

Student's Name: _____ **Grade:** _____

Health Insurance Provider: _____

LIABILITY WAIVER

This is to acknowledge that my child is in good physical condition with exception as stated below: (indicate any impediment) _____. This information is for the Cary Junior High School and its coaches only. This information will only be used for the child's benefit while participating.

Additionally, I am enrolled in the above medical insurance program, by which the above named child, is covered. I am aware that the Cary Junior High School is not enrolled in a medical coverage plan. I consent to the foregoing and grant permission for my child to participate in the Cary Junior High School extracurricular activity.

MEDICATION

Please note that during after-school activities, there is no one available to administer medications to students. Should medication be necessary at these times, it is the parent's responsibility to administer and exceptions will be made ONLY for those students for whom self-administration is necessary and who have secured approval through filing of the necessary medication forms in the school office.

RELEASE

In consideration of participation in activities of the Cary Junior High School, I do hereby release, indemnify, discharge and save whole and harmless the Cary Junior High School, the Board of Education, Supervisors, Coaches, and other players, and their successors, from any and all liability for damages or claim for damages, causes for action, claims, demands, costs, expenses and compensation of any nature whatsoever, and any and all known and unknown personal injuries, sickness, illness or disorder, which I may now or hereafter have (as parent and/or guardian of my minor child, and also all claims or rights of action for damages which the said minor child has or may hereafter have) arising out of or connected with participation in any activities whatsoever of the Cary Junior High School.

I further state that I have carefully read the foregoing application including the Liability Waiver and Release and know the contents hereof, and I sign the same as of my own free act and deed.

Parent Signature: _____ **Date:** _____

EXTRA-CURRICULAR ACTIVITIES OFFERED AT CARY JUNIOR HIGH SCHOOL

Activities are listed by the time of year offered, as well as what grades are eligible to participate.

I grant permission for my child, to participate in those activities marked below with a check (v).

YEAR-ROUND	FALL	LATE FALL/ EARLY WINTER	WINTER	SPRING
<input type="checkbox"/> Intramurals (6,7,8)	<input type="checkbox"/> Cross Country (6,7,8) <input type="checkbox"/> Girls' Volleyball (7,8)	<input type="checkbox"/> Boys' Basketball (7,8) <input type="checkbox"/> Cheerleading (6,7,8) <input type="checkbox"/> Poms (6,7,8)	<input type="checkbox"/> Girls' Basketball (7,8) <input type="checkbox"/> Wrestling (6,7,8)	<input type="checkbox"/> Track & Field (6,7,8)