



Athletics/Activity Medical Insurance Verification

Student's Name _____ Date _____

Birthdate _____ Year in School: (circle one) 6 7 8 9 10 11 12

I, the undersigned parent / guardian of the above named student, give my permission for him/her to engage in the following extra-curricular activities and travel as scheduled by the school for such activities:

- | | | | |
|---------------------|------------------|-----------------|-----------------------|
| _____ Football | _____ Track | _____ Wrestling | _____ Golf |
| _____ Volleyball | _____ Baseball | _____ Soccer | _____ Club Activities |
| _____ Cross Country | _____ Basketball | _____ Speech | _____ Cheerleading |
| _____ Rooter Bus | _____ Annual | _____ Softball | _____ Other |

I hereby authorize emergency medical treatment and/or transportation to a medical facility for any injury or illness deemed urgently necessary by a licensed trainer, coach or medical practitioner. Every effort will be made to contact and consult with the parent or guardian in case a medical emergency arises that would require any involved treatment.

Conditions

1. As required by the Rogue River School District, my student is fully covered by the indicated insurance program.
2. I understand that School District #35 assumes no financial obligation for any injury that may occur. I give consent for my student to participate in the above activity with full knowledge and understanding of the risk of serious injury, which may result.

Name of Insurance

Company Policy #

Parent / Guardian (Please Print)

Signature & Date

Street Address

P. O. Box

City

State

Zip Code

Home Phone

Cell Phone

Work Phone

Physician

Phone

Additional Emergency Contacts (Names & Phone Numbers): _____

This form must be completed for each sport or activity that the student will be participating in.



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Legal Notice

Proclamation of Intent

Rogue River School District #35

Rogue River, Oregon

Federal law requires that parent/guardians be advised if information concerning students is to be released. So that we can use information about students in newspaper articles, athletic rosters, yearbook, honor rolls, and similar releases, the following kinds of information will be considered directory information and may be released by Rogue River School District #35: A student's name, address, telephone listing, photograph, date and place of birth, participation in officially recognized activities and sports, weight and height of member of athletic teams, dates of attendance, degrees and awards received, most recent previous school or program attended, such illness or accident information as may be appropriate for dealing with health and safety emergencies.

Exclusions from any or all directory categories identified as directory information must be submitted in writing to the school principal by the parent, student 18 years of age, or emancipated student, within 15 days of annual public notice.

Patrick Lee
Superintendent