FRESNO UNIFIED SCHOOL DISTRICT
ATHLETIC INSURANCE INFORMATION AND PERMISSION SLIP
HIGH SCHOOL/FOOTBALL FORM

2025-2026

In order for your student to participate in athletics, they must be covered for the following:
MEDICAL AND HOSPITAL INSURANCE FOR AT LEAST $1500.00
Please choose below which insurance plan you are purchasing and complete the online form at
https://studentinsuranceusa.com/
If you have your own insurance, fill in #2.

		Low	Mid	High
1.	Tackle Football Coverage Only (No Deductible)	$85.00	$115.00	$215.00

2. Own Insurance:
Medical _____
Company Name and group or Policy Number

I, as parent or guardian of_____, a student at_____High School give my permission for him/her to participate in the following activities:_____.

I hereby acknowledge that I have been informed that pursuant to the provisions of Education Code Sections 32220-24, et.al. amended by the 1981 State Legislature, the governing boards of the various school districts shall NOT require that each member of an athletic team have $1500.00 for accidental death. At least $1500 hospital coverage arising while such members are engaged in, or preparing for, an athletic event promoted under the sponsorship or arrangements for the educational institution or a student body organization IS required.

It is my understanding that my child must be protected by insurance in order to participate as a member of an athletic team. It is further my understanding that I may purchase, through the school, a special insurance policy for football and a special student accident policy which will protect my child for all other sports under the provisions of the law, but that in lieu of purchasing a special insurance policy I, as parent or guardian, may provide insurance for my child.

This is to certify that my child is protected under insurance, and that I hereby agree to indemnify and hold the Fresno Unified School District harmless against responsibility for insurance coverage required under aforementioned legal sections.

→PARENT/GUARDIAN SIGNATURE:_____DATE:_____

INFORMED CONSENT/FOOTBALL MAY BE HAZARDOUS

There have been many improvements made in protective equipment to reduce injuries in the game of football. Over the years, there have been many rule changes, changes in coaching techniques, advances in sports medicine, all for the purpose of decreasing injuries. It is of utmost importance for you, the player, to know the rules and play within the spirit of those rules for your own safety.

Relative to the number of injuries and deaths that occur on the highways with cars, cycling, and pedestrians, football would rate low on the scale.

It is important, though, for you to know that injuries do occur in football and that some of these injuries can be catastrophic. Catastrophic means permanent serious injury such as total paralysis, partial paralysis, and even death. It is possible for this to happen to you, and it is important for you to fully understand this before participating in the sport. You, as a player, can help make the game safer by not intentionally using techniques which are illegal and which can cause serious injury.

HELMET WARNING

Do not use your helmet to butt, ram, or spear an opposing player. This is in violation of the football rules and such can result in severe head or neck injuries, paralysis, or even death to you and possible injury to your opponent. No helmet can prevent all head or neck injuries a player might receive while participating in football.

I HAVE READ THE ABOVE STATEMENT AND FULLY UNDERSTAND ITS IMPLICATIONS. AS A PARENT/GURARDIAN, I ALSO GIVE MY PERMISSION TO TRANSPORT MY SON/DAUGHTER TO ATHLETIC CONTESTS ON DISTRICT APPROVED TRANSPORTATION.

→PARENT/GUARDIAN SIGNATURE:_____DATE:_____

→STUDENT SIGNATURE:_____DATE:_____

DO NOT MAIL THIS FORM IN – INTERNAL DOCUMENT – TO BE KEPT ON FILE AT SCHOOL

OFFICE USE: Physical _____Yes _____No Code of Ethics _____Yes _____No **REV. 7/25**