STRONG ROCK
CHRISTIAN SCHOOL

PARENT/STUDENT SUBSTANCE ABUSE POLICY
CHEMICAL SCREENING CONSENT AND RELEASE FORM

Student Name	Date	
Street Address	City, State, Zip Code	Telephone No.

I/We the undersigned parent(s) or legal guardian(s) of _____ hereby acknowledge that I/we have been informed of Strong Rock Christian School's ("Strong Rock") Substance Abuse Policy and agree on behalf of our child to be bound by this policy for purposes of his/her enrollment and/or continued attendance at Strong Rock Christian School for the school year 2026-2027. I/we also hereby state that: to the best of our knowledge, our child is not a user of controlled substances that he/she does not have a prescription for, nor is a user of any illegal substances.

I/we, as the parent(s) or legal guardian(s) of the minor child, understand and consent freely and voluntarily to Strong Rock's request for a urine or other specimen or sample from our minor child, if and when such request is made. I/we further state that consent given herein is valid for the entire current school year, and that further notice or consent is waived

I/we hereby release and hold harmless Strong Rock Christian School, the medical review officer or other medical professionals, the laboratory, their employees, agents and contractors from any liability arising from this request to furnish this or any specimen or sample, the testing of the specimen or sample, and any decisions made concerning our child's continued attendance at Strong Rock Christian School, based upon the results of the tests. I/we, as parent(s) or legal guardian(s) and on behalf of our minor child, consent to allow the laboratory, hospital, medical review officer or other medical professional to perform appropriate chemical tests for the presence of alcohol, drugs or other controlled substances. I/we give permission to any laboratory, hospital, medical review officer or other medical professional to release the results of these tests to Strong Rock and release any such designated institution or person from any liability whatsoever arising from the release of this information.

Parent/Legal Guardian Signature	Date
Parent/Legal Guardian Signature	Date
Student Signature	Date