MONTGOMERY COUNTY PUBLIC SCHOOLS
PARENT/GUARDIAN PERMISSION FORM

_____ Grade _____ has my permission to

(Please print student's first and last name.)

participate in the following interscholastic activities at _____.

(School)

PLEASE NOTE: The middle school interscholastic athletics program is more competitive than participatory. Therefore, selection to a team does not ensure participation in each contest.

Participation in competitive sports is potentially dangerous, and physical injuries may occur that require emergency medical treatment.

Please check all activities in which your child might participate this school year:

☐ Basketball ☐ Softball ☐ Soccer ☐ Cross Country

I have indicated below the manner in which my child will be transported home.

☐ Activity Bus

☐ Walk

☐ I will pick up my child

☐ Other

It is recommended that each participant be covered by medical insurance. Forms for purchasing school insurance can be obtained at each school.

Please check one of the following:

☐ The above named student is covered by medical insurance.

☐ The above student is **NOT** covered by medical insurance.

☐ I wish to purchase school insurance.

_____ _____

(Signature of Parent/Guardian) (Date)

When the parents are divorced and have legal joint custody, both parents must sign.