PARENTAL PERMISSION (to be completed by the parent or guardian)

I have read and reviewed the general requirements for high school athletic eligibility and I have discussed these requirements with my student-athlete. I understand that additional questions or specific circumstances should be directed to my student's principal, athletic director or coach.

I certify that the home address as parents shown on the reverse is my sale bona fide residence and I will notify the school principal immediately of any change in residence, since such a move may alter the eligibility status of my student-athlete. All other information contained on this form is accurate and current.

I also acknowledge that there is a certain risk of injury involved with athletic participation; even with the best coaching, use of most advanced protective equipment and strict observance of the rules, injuries are still a possibility and on rare occasions these can be so severe as to result in total disability, paralysis or even death. It is impossible to eliminate this risk.

In accordance with the rules of the NCHSAA, I hereby give my consent for the participation of the student-athlete named on the reverse for the activities NOT MARKED OUT BELOW:

SWIMMING

GOLF

BASEBALL

	BASKETE CROSS O FOOTBAI SOFTBAI	COUNTRY LL	INDOOR TRA OUTDOOR TO SOCCER CHEERLEAD	RACK	TENNIS VOLLEYBALL WRESTLING	
OTHERS (school may list)						
Date_		Parent's c	or Guardian's Si	ignature		
	NOTE:	This statement should for one school		n the principal'	s office and is .	
(continue) ATHLETIC PARTICIPATION (to be completed by the student-athlete)						
Schoo	l Year					
Name ₋	Last	First		Middle	_ Date of Birth	

Home Address_____ City _____ Zip____

I his is my consecutive semester at High School, and I entered
the ninth grade in of 20 Last semester, I attended
School and passed (number) courses. I have also not been convicted of a
felony or an act that would have been a felony if I were not classified as a juvenile.
, , , , , , , , , , , , , , , , , , ,
I certify that the above information is correct, that I have read the summary of NCHSAA
eligibility rules and that I agree to abide by those standards and those of my school.
I also acknowledge that there is a certain risk of injury involved with athletic participation;
even with the best coaching, use of most advanced protective equipment and strict observance
of the rules, injuries are still a possibility and on rare occasions these can be so severe as to
result in total disability, paralysis or even death. It is impossible to eliminate this risk.
Date
Student-Athlete's Name
Student-Athlete's Signature

(Please be sure to complete both sides)