

## ATHLETIC PERMISSION FORM

I, \_\_\_\_\_, as the parent or legal guardian of the athlete named below,

Name of parent/guardian

realize that participation in any High School athletic program may involve the potential for injury.

I also acknowledge that even with the best coaching, use of advanced protective equipment and strict observance of rules, injuries are still a possibility. An addendum with a specific permission may be required of certain students who have unique medical conditions. I also acknowledge that I have read the "Insurance Letter" attached to this form and understand the limits of coverage, benefits and the "Excess Payment Clause".

**I am the parent or legal guardian (*circle one*) for**

\_\_\_\_\_  
**Name of Student Athlete**

**and hereby give permission for my child to participate in (list ONE sport):**

\_\_\_\_\_  
(name of sport)

In order to participate in the Manville Athletic Program, a student must have a current physical on the state-mandated forms (N.J.C.A. 6A:16-2.2 (g, h) that has been reviewed by the School Physician. The above physical is good for 365 days. A new Athletic Pre-Participation Physical Examination Form (completed and signed by the parent or legal guardian) must accompany all other required forms for each season. Please indicate one of the following if your child's physical is no longer valid, or will expire before the sport season ends:

**I give permission for the School Physician to perform the required NJSIAA Athletic Pre-Participation Physical Evaluation**

OR

**I will have my child's physical performed (or submit a previously completed current physical by a private healthcare provider) on the required NJSIAA Athletic Pre-Participation Physical Evaluation which then must be reviewed by the School Physician.**

\_\_\_\_\_  
**Parent / Guardian Signature**

\_\_\_\_\_  
**Date**