

Margate City School District

Transportation Consent & Waiver for Sports Activities

***IMPORTANT- PLEASE SIGN and return to school**

Student Name

EA Tighe Middle School

Name of School

As parent/guardian of the above-named student, I do hereby consent that my child be permitted to tryout and participate in school sport(s). When such projects require transportation of pupils from and to Margate City Schools, and I hereby expressly waive any and all rights of actions, suits, claims, or demands whatsoever against the Margate Board of Education, which I may have by reason of any matter happening, cause or thing which may occur at any time between the departure from and the return to Margate City Schools.

It is also understood that time after school will be required for tryouts, practice and competition. I am aware that sport (s) activities may present physical hazards.

X _____
Signature

Date

This waiver is to be kept on file in each student's respective principal's office.

Sports-Related Concussions, Sudden Cardiac Death in Young Athletes and Sports-Related Eye Injuries

I have read and received a copy of the following : Margate Board of Education policy on Sports-Related Concussions, and the Sudden Cardiac Death in Young Athletes and Sports-Related Eye Injuries pamphlets.

X _____
Signature

Date