

WEBER SCHOOL DISTRICT
5320 SOUTH ADAMS AVENUE
OGDEN, UTAH 84405

Dear Parent:

The junior high school athletic program of the Weber School District is again being conducted this year.

With the welfare of all concerned in mind, we are requesting that the procedures listed below be followed before your son/daughter, _____, will be eligible to participate in the athletic program.

Your signature will be interpreted to mean that you have complied with each one of the following items:

That you have given consent to having your son/daughter participate in the athletic program and to travel to and from other schools for this purpose.

That he/she has been examined by a physician licensed in the state of Utah and has been found physically acceptable to participate. A signed statement from the physician must be attached to this sheet. This must have taken place within a 12 month period prior to the sport in which the student is participating.

That you have given emergency medical authorization at your expense for transportation and/or treatment by a physician or hospital when the parents/guardian are not available.

That he/she is covered by insurance. Please check one of the following:

_____ We have taken the insurance policy approved by the principal and the school district administration covering him/her for accidents.

_____ We have our own family insurance policy.

That you are aware that there are eligibility requirements for participation and that your son/daughter will comply with and meet those requirements or will not be allowed to participate.

You further certify by signing below that you agree that any claim or dispute arising out of injuries sustained while participating in these activities shall be settled by binding arbitration administered by the American Arbitration Association under its commercial arbitration rules, and judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

Please check the activity or activities in which your child will be participating:

___ FOOTBALL ___ BASKETBALL ___ VOLLEYBALL ___ CHEERLEADING

___ BASEBALL ___ SOFTBALL ___ TRACK ___ NAL

Respectfully yours,

Principal: _____ Date: _____

Parent: _____ Date: _____

Coach: _____ Date: _____