

Muscogee County School District
Athletic Permission Form

I hereby give my permission for my son/daughter/ward, _____,
to participate in the interscholastic athletic program at Shaw High School during the
2007-08 school year.

It is understood by me that neither the Muscogee County School District nor the school
carries liability or medical pay insurance which covers participation in the athletic
program, nor may school funds be used to pay for medical treatment for personal injuries
sustained while practicing for or otherwise participating in such athletic program or
events or while on trips in connection therewith.

I do hereby release and agree to indemnity and hold harmless the Muscogee County
School District and the above named school, its agents, servants, and employees from and
for all claims and loss on account of injuries, medical expenses and damages of whatever
kind which may be sustained by me or said student on account of any injury resulting
from participation in such activities.

I certify further that I have insurance which provides medical coverage for said student
with _____, Policy Number _____.
(Name of Company)

Signature of Parent

Street Address

Date

Telephone Number

I do not have insurance. The coach at Shaw High School has offered my child the option
of purchasing school insurance. I have chosen not to purchase school insurance.

Parent Signature