

PARENT/GUARDIAN PERMISSION

I give permission for my child to participate and accept responsibility for my son/daughter to abide by the Athletic Code of Ethics of Friendship Central School for the

_____ Season _____ Year
(Sport) (year of sport)

Printed _____
(parent/guardian printed)

Signed _____
(parent/guardian signature)

Date _____
(day/month/year)

I understand that there is an inherent danger for injury in sport participation, and will follow safety rules and regulations. I also agree to abide by the ATHLETIC CODE OF ETHICS, RULES AND REGULATIONS, AND PROCEDURES FOR ENFORCING REGULATIONS of Friendship Central School.

Printed _____
(student printed)

Signed _____
(student signature)

Date _____
(day/month/year)

