

## 2023 Spring/Summer Cheer Emergency & Clearance

Completion of this form is for participation in school related Spring/Summer cheer activities only. Activities may include practices, competitions (on and off campus), weight training, conditioning, and cheer camps (on and off campus) that are organized and supervised by Snohomish School District staff.

2022-2023 School

Glacier Peak Hi	gh School Valley View N	1iddle School
Thursday, May 18: Tr	<u>Dates of activities</u> Tryout Clinic GPHS Mat Room – 4:0 ryout Clinic GPHS Mat Room – 4:00 eer Tryouts GPHS Mat Room – 4:00	to 6:00 p.m.
Athlete's Name		Student's Phone Number
Street Address	City	Zip Code
Emergency Contact #1	- Relationship	Phone
Emergency Contact #2	Relationship	Phone
Preferred Physician	Phone	Medical Insurance Company
Medical Concerns/Allergies		
<b>EMERGENCY TREATMENT:</b> If the parents and/or emergency, and if immediate observation or treat and direct the school authorities to send the pupi render such observation and treatment as immed	ment is urgent in the judgement of th I to the hospital or doctor most easily	e school authorities, do you authorize
	YES NO	
<b>INSURANCE:</b> I assume full financial responsibility understand that the Snohomish School District do		

**PHYSICAL:** Athletes are required to have a current physical on file in the athletic office to participate in spring/summer activities. Physicals are valid for 24 months, provided they are valid for the duration of the sport's summer activities.

**RIDE PERMIT:** I hereby give permission for my child to travel to/from athletic events or activities in transportation arranged by school officials. I also understand that through my written permission my child may be allowed to be transported by another carrier.

**CONCUSSION AWARENESS AND SUDDEN CARDIAC ARREST AWARENESS:** I have received, read and understand the information presented in the concussion recognition and sudden cardiac arrest awareness pamphlets.

**POOL:** If a pool is available during off campus activities, it may not be supervised by lifeguards. Swimming (no diving) will only be allowed when a coach or trip chaperone is present.

**SCHOOL ACTIVITY: I** understand that school rules of conduct will apply while participating in these summer activities, including on campus and off campus practices, training sessions and athletic camps.

**SUPERVISION**: Coaches will provide details of any off campus activities which will include event details (dates, times and location), transportation plan and supervision plan to parents and athletes prior to these events.

WARNING AND AGREEMENT TO OBEY INSTRUCTIONS: I am aware that playing or practicing to play/participate in any sport can be a dangerous activity involving many RISKS OF INJURY. I understand that the dangers and risks of playing or practicing to play/participate in interscholastic sport(s) include but are not limited to death, serious neck and spinal injuries (which may result in complete or partial paralysis), brain damage, injury to internal organs, bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal systems. I understand that the dangers and risks of playing or practicing to play/participate in the interscholastic sport(s) may result not only in serious injury, but also in a serious impairment of my future abilities. Because of the dangers of participating in the interscholastic sport(s), I recognize the importance of following coaches' instructions regarding playing techniques, training and other team rules, etc, and agree to obey such instructions. I further understand that by following the instructions provided by the Snohomish School District, the risk of injury described above may be reduced, but that due to the nature of the sport I have selected, there is still risk of injury regardless of the precautions taken or procedures followed. I further acknowledge that baseball, basketball, football, soccer and wrestling are sports which involve violent person-to-person contact and, therefore, the risk of injury in these sports is even greater than other sports. I understand that all sports can involve many RISKS OF INJURY, including, but not limited to, those risks outlined. I also understand that the consequences of injury may exceed the benefits afforded by my own medical insurance and acknowledge that the District has informed me of this possibility. I agree to hold harmless and indemnify the Snohomish School District, its employees, officers and agents from all claims, liability, actions or lawsuits, except for acts or omissions involving the sole negligence of the School District.

Parent/Guardian's Signature	Date	
Athlete's Signature	Student ID #	 Date
Please attach current	physical good for the 2023	3-2024 school year.
	Snohomish School District Student	
·		