

**Barre Town Athletic Participation Form
2009-2010**

Health and Personal Info

Student Name _____ Date of Birth _____

Grade _____ Age _____ Phone _____

Address _____

Parents/Guardians-

Name _____ Phone (H) _____ (w) _____

Name _____ Phone (H) _____ (w) _____

Other contact numbers _____

In the event that a parent or guardian can't be reached please list an additional person to contact in case of emergency _____

Phone _____ Relationship to student _____

Family Physician _____ Dentist _____

Insurance Company _____ **Policy #** _____ (required)

Allergies _____ Special Health Concerns _____

Medications/Reasons for use _____

Permission for Treatment

Parent or Guardian: In case of injury during interscholastic competition, practice, on school grounds, or during a school sponsored activity, I hereby consent to have the below named student examined and, if required, to be treated by a physician or hospital. I am of the understanding that in case of an injury, the school will make every effort to contact me prior to taking the student to a physician or hospital. In the event I cannot be notified, the school and it's representatives have my permission to take the appropriate steps to insure the safety and well being of my child named below.

I, the parent/guardian of _____, give permission to the
Student's Name

authorized personnel of Barre Town Elementary and Middle School to sign for treatment
in case of accident or injury.

Signature of Parent/Guardian

Date

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Requirements for participation:

- 1. Parent permission with signature for each sport.**
- 2. Proof of sports physical within the last two years.**
- 3. Completion of Barre Town Athletic Participation form.**
- 4. Academically Eligible (Basketball only)**

Parent Permission for Participation

I, the parent/guardian of _____ give my permission for him/her to
Student's Name
participate in the following sports. Please sign in the space provided below.

Soccer _____

Field Hockey _____

Cross Country _____

Basketball _____

Important! All students must meet all of the above requirements before they will be allowed to practice. You can turn in your paperwork at the Parent Information night or to the Athletic Director- Phil Joyal.

If you have any questions feel free to contact me at
School email- pjoyabte@u61.net
or
802-476-6617 ext 249.