

# Brookfield Public Schools Interscholastic Athletics

## Consent, Acknowledgement, & Release Form

Name:	Date of Birth:	Grade:
Parent/Guardian Name		
Address:		
Telephone # (H):	(C)	(W)

### Statement of Understanding for Participation

There are many diverse activities and organizations at Brookfield High School. Interscholastic athletic teams consist of voluntary participants who must accept certain restrictions that are not imposed on the general student body. We believe interscholastic athletic participation provides student-athletes with the discipline required in a group experience.

The Brookfield High School **Student Handbook** outlines the policies and guidelines which govern the interscholastic program. Parents and student-athletes are required to read this handbook before signing this form. The handbook can be found on-line at : <http://www.brookfield.k12.ct.us/brookfield-high-school/student-services/files/student-handbook>

### Advisement Consent

**Warning: Although participation in supervised interscholastic athletics may be one of the least hazardous activities in which any student will engage in, in or out of school, by its nature, participation in interscholastic athletics includes a risk of injury which may range in severity from minor, to long term, to catastrophic. Athletic injuries can include but are not limited to bruises, scrapes, fractures, dislocations, concussions, paralysis, or death. Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate this risk.**

Participants can and have the responsibility to help reduce the chance of injury. Players understand, and by their participation agree, that they must and will obey all safety and training rules, follow directives of coaches, promptly report all physical problems to their coaches, follow a proper conditioning program and inspect their own equipment daily.

I know and acknowledge that my son/daughter knows of the risks involved in athletic participation, understands that serious injury is possible in such participation and chooses to accept any and all responsibility for his/her safety and welfare while participating in athletics.

With full understanding of the risks involved, I release and hold harmless Brookfield High School, schools involved and the Connecticut Interscholastic Athletic Conference (CIAC) of any and all responsibility and liability for any injury or claim resulting from such athletic participation and agree to take no legal action because of any accident or mishap involving the athletic participation of my son/daughter.

### I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A RELEASE

I have read this and acknowledge the "warning" above, accept the risks described, and agree to abide by the principles and regulations contained therein. In addition, I have read and understand the policies and regulations outlined in the Brookfield **Student Handbook**.

**Signature or Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I have read this and acknowledge the "warning" above, accept the risks described and agree to abide by the principles and regulations contained therein. In addition, I have read and understand the policies and regulations outlined in the Brookfield **Student Handbook**.

**Signature or Student-Athlete:** \_\_\_\_\_

**Date:** \_\_\_\_\_