

ACKNOWLEDGEMENT OF WARNING

We, hereby acknowledge that by participation in athletics, an athlete may suffer serious injury. These injuries may include, but are not limited to: sprains, fractures, ligament and/or cartilage damage, which could result in temporary or permanent, partial, or complete impairment in the use of limbs, brain damage or even death. Having been so cautioned and warned, with full knowledge and understanding of the risk or serious injury, it is our desire to give consent for participation in athletics at Western Reserve Local Schools.

X

Parent/Guardian Signature

Athlete Signature

Date

INSURANCE WAIVER

Every student-athlete must present a complete Insurance Waiver Form or verification of school insurance in order to practice or take part in inter-scholastic athletics. The Insurance Waiver is a statement from parents indicating that they have insurance to cover sports injuries and do not desire school insurance. The Insurance Waiver form must be submitted prior to the first practice. Enrollment forms for school insurance can be secured through the Main Office. O.H.S.A.A. has catastrophe Insurance for the high school and junior high school athletes enrolled in member schools.

Please indicate:

_____ **YES, my son/daughter** _____ **is covered by**
insurance during his/her participation in athletics.

_____ **We will purchase school insurance.**

X

Parent/Guardian Signature

Date