

****APPROVAL FORM****

Parents/Guardians:

Please **keep all “BLUE”** copies for your records. You do **NOT** need to sign each individual form.

Athletes need to return the following white forms to the Office:

- Complete physical form page 1 & page 2 if applicable
- Complete your name and date of birth on page 3
- Complete your name, sex, age, and date of birth on page 4
- Emergency medical form – you must carry insurance on your child or purchase school insurance to participate in school athletics
- This “Approval Form” (this replaces signing all individual blue forms)

You only **need to return ALL WHITE COPIES**, please keep the blue copies for your files.

I have read the following blue forms and approve each of them for my child and myself. I approve my child to participate in athletics at Chippewa Local Schools:

FORM A – OHSAA Authorization for 2017-2018, page 5 of 6

FORM B – OHSAA Eligibility and Authorization Statement, page 6 of 6

FORM C – OHSAA – The Fan Pledge

FORM D – Chippewa Local Schools Athletic Training Rules

FORM E – Ohio Department of Health Concussion Information Sheet for Interscholastic Athletics

FORM F – 2017-2018 Student Insurance Program – offered if you do not personally have insurance

FORM G – Morning practices

I have viewed the OHSAA pre-season informational video.

Parent’s name (printed)

Student’s name (printed)

Parent’s name (signature)

Student’s name (signature)

Date