

**BREWBAKER TECHNOLOGY MAGNET
ATHLETICS
PERMISSION TO PARTICIPATE**

ATHLETE _____ SPORT _____

ADDRESS _____

PHONE _____ BUSINESS _____ GRADE _____

I (we) hereby permit my (our) son/daughter to participate on the Brewbaker Technology Magnet High School _____ team and to engage in all activities related to the team, including, but not limited to trying out, practicing, transportation by bus and personal vehicles, and playing in competitions. I (we) understand and assume all risks, which may include, but are not limited to sprains, muscles, internal organs, and/or brain, associated with said participation, and recognize the importance of following coaches' instructions regarding playing techniques, training guidelines, and team rules. As part of this agreement to permit my (our) son/daughter to participate on the Brewbaker Technology Magnet High School _____ team, I (we) agree to provide the school administration the following forms, fees, or information:

- | | |
|--|------------------------|
| ____ Physical examination form | ____ Insurance waiver |
| ____ AHSAA Participant agree, consent, and release | ____ Participation fee |
| ____ Media release form | ____ Concussion form |

I (We) acknowledge that we have been properly advised, warned, and cautioned by the administration and coaching personnel of the Brewbaker Technology Magnet High School and the Montgomery County School system that participation in athletics can result in an athlete suffering serious injury. Having been so cautioned and warned, with full knowledge and understanding of the risk of serious injury from participation in Basketball, it is our desire to consent to my (our) son's/daughter's participation for the duration of the time that he/she is a student at Brewbaker Technology Magnet High School (9th grade through 12th grade).

Parent/Guardian Signature

Date

Athlete's Signature

Date