**ODESSA R-7 ACTIVITY/ATHLETIC**

**COMMITMENT FORM**

**(2011-2012)**

PARTICIPANT’S NAME (*PRINT*)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SCHOOL YEAR\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE LIST ALL ACTIVITIES OR SPORTS on line below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prior to participating in any practice or tryout sessions for any interscholastic sport, each athlete must:

* Successfully pass a physical examination by a registered physician or other authorized health care provider, and the copy of such examination must be on file in the office of the building activities director. The physical exam is valid if issued on or after February 1st of the previous school year.
* Return the Activity/Athletic Commitment Form properly signed.
* Provide proof of personal health insurance.
* Have parent and student signature.

As a school’s student participating voluntarily in interscholastic athletics and activities. I verify that:

1. I have read this booklet and understand what the Odessa R-7 School District expects from me in regards to sportsmanship, citizenship, scholastics, and staying free from drug/alcohol/tobacco use while enrolled in this school. I understand the consequences for breaking school policy, and I will not do so while an Odessa R-7 School District student participant. I will be responsible for all equipment issued to me throughout the season, will return such equipment at the conclusion of the season, and will pay the current replacement cost for any of the equipment not accounted for by me at the end of the season.
2. I acknowledge that I have been properly advised, cautioned, and warned by administrative and coaching personnel of the school district that I am exposing myself to the risk of injury, including but not limited to, the risk of sprains, fractures and ligament and/or cartilage damage which could result in temporary or permanent, partial, or complete impairment in the use of my limbs; brain damage; paralysis; or even death. Having been so cautioned and warned, it is still my desire to participate in sports and activities and to do so with full knowledge and understanding of the risk of injury.
3. I, along with my parents, certify that I have read, understand, and will follow all of the school district’s policies in the activity/athletic handbook. In order to be eligible for participation, I understand I must comply with all requirements listed.

**Odessa R-7 Citizenship Violation Consequences**. Non-creditable citizenship may result in disciplinary action. These actions may include parental contact, one-on-one conferences, extra athletic conditioning, benching, non-participation in interscholastic games, and/or a percentage of the interscholastic season withheld. Ultimately, removal from participation and/or the team can occur. A student shall not be eligible while under suspension.

Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As a parent/guardian of a student participating voluntarily in interscholastic athletics/activities, I have read this handbook, discussed it with my son/daughter, and will support the high school in its efforts to promote good citizenship.

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Please note: Coaches or sponsors may have additional policies other than what is listed in the handbook and this information must be provided in writing to each student/athlete and parent.**