

Dear Parents,

Attached are the annual sports physical forms developed by the NJ Department of Education. No other physical forms are acceptable. These forms are available on the school web-site.

For each sport, a student must provide the following forms completed by a parent: "Permission to Participate", "Emergency Contacts" and "Health History Questionnaire".

In addition, students must have on file a completed "Part B: Physical evaluation form" performed within 365 days of the first practice. This must be completed by the student's family physician.

For questions related to paperwork requirements, please contact me at 996.6811 x227.

Dorothy Fuchs
AMS School Nurse

EMERGENCY CONTACTS

Name: _____

Sport: _____

List contact numbers in the event it is necessary to reach student's parent/guardian during practice or a game.

First Contact:

Name: _____ Relationship: _____

Phone # _____

Second Contact:

Name: _____ Relationship: _____

Phone #: _____

List any medical condition that the student's coach should be aware of: allergies, need for Inhaler, etc.

Name of Insurance Carrier: _____ Policy #: _____

Physician: _____ Phone #: _____

Parent Signature: _____ Date: _____

PERMISSION TO PARTICIPATE

To The Principal:

I hereby request permission to participate on the Alexandria Middle School _____ team.

Realizing that such activity involves the potential for injury which is inherent in all sports, I/we acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of rules, injuries are still a possibility. On rare occasions, these injuries can be so severe as to result in total disability, paralysis, or even death. I/we acknowledge that I/we have read and understand this warning.

Signature of Pupil

Date

I hereby give consent to the participation of my child, _____, on the _____ team representing the school.

I agree that my child will use the means of transportation to and from "away" games designated by the school authorities. Failing this, I will, by means of a written note, assure responsibility for his or her safe transportation.

Realizing that such activity involves the potential for injury which is inherent in all sports, I/we acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of rules, injuries are still a possibility. On rare occasions, these injuries can be so severe as to result in total disability, paralysis or even death. I/we acknowledge that I/we have read and understand this warning.

Signature of Parent/Guardian

Date