



Poudre School District  
 2407 LaPorte Ave  
 Fort Collins, CO 80521  
 970-482-7420

**2021-2022**  
**Middle School Athletic Participation**  
**Permission and Release**

An Athletic Participation Permission and Release of Liability form must be completed and submitted to the school of athletic participation as designated below each school year and must list the sport(s) the student wishes to participate in before the student will be allowed to practice or compete in those sport(s). A current Physician Certification of Student Fitness for Athletic Participation form must also be submitted and on file at the school of athletic participation.

**Student Information**

Student's Name (Last, First, M.I.) \_\_\_\_\_ PSD Student ID# \_\_\_\_\_  
 (Leave blank if not a current PSD student)

Student's Date of Birth \_\_\_\_\_ Grade for 2021-2022 \_\_\_\_\_  Male  Female

Student's Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent(s)/Legal Guardian(s) Name(s) \_\_\_\_\_ Telephone \_\_\_\_\_

**For the above referenced school year:**

School of Attendance \_\_\_\_\_ Previous Year's School of Attendance \_\_\_\_\_

School of Athletic Participation \_\_\_\_\_

This permission and release of liability made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, is given  
Day of month Month Year

by the student named above (the "Student") and the Student's parent(s)/legal guardian(s) named above ("Parent(s)") in favor of Poudre School District No. R-1 (the "District").

In consideration of permission granted by the District for the Student to participate in the sport(s) listed below (the "Sport(s)") at the School of Athletic Participation noted above (List all sports the student will participate in during the above referenced school year\*):

Student and Parent(s) hereby covenant and agree as follows:

Student and Parent(s) release and hold harmless the District and its board members, employees and agents from any and all liability claims, causes of action, damages and demands of any kind whatsoever (except willful and wanton acts or omissions) that Student and/or Parent(s) may have against the District and its board members, employee and/or agents for any and all damages that may arise out of or in connection with the Sport(s).

By its nature, participation in athletics includes certain risks and dangers particular to each sport, including the risk of injury ranging in severity from minor to catastrophic and long-term. Student and Parent(s) understanding and appreciating the risks and dangers that may exist in allowing Student to participate in the Sport(s), assume the risk of any and all damages, including personal injury, which Student may incur as a result of participating in the Sport(s).

\* List of District-sponsored sports + Special Olympics of Colorado

- |               |          |               |            |                  |
|---------------|----------|---------------|------------|------------------|
| Basketball    | Football | Tennis        | Softball   | Wrestling        |
| Cross Country | Golf     | Track & Field | Volleyball | +SOCO Basketball |

Student and Parent(s) acknowledge and represent that they have read the *Poudre School District Athletic Handbook* available at <https://www.psdschools.org/sites/default/files/PSD/athletics/2019-2020%20PSD%20Athletic%20Handbook.pdf> and in hard-copy form, and acknowledge that they are subject to its terms and conditions. Specifically, Student and Parent(s) acknowledge and represent that they have read and understand, specifically Article XIV – Training and Personal Conduct Rules. Student and Parent(s) also acknowledge and represent that they have read and understand Board Policy JLCD, Administering Medicines to Students/Asthma, Food Allergy and Anaphylaxis Health Management, which is included in the Poudre School District Student Rights & Code of Conduct and is also available at <https://www.psdschools.org/sites/default/files/PSD/policies/JLCD.pdf> Student and Parent(s) understand and acknowledge that the District's consequences for controlled substances, alcohol, and tobacco violations are separate and in addition to any consequences imposed by state or local law enforcement.

The District provides transportation for students to and from many practices and competitions. However, the District is unable to provide transportation in all circumstances and to all events. The nature of some sports requires practices and competitions to be held off-campus, limiting the District's ability to provide transportation on every occasion. Student and Parent(s) hereby acknowledge and understand that the District does not assume any responsibility for the Student's transportation when District transportation is not used and the Student and/or Parent(s) are solely responsible for making appropriate arrangements to and/or from the athletic practice or competition.

Student and Parent(s) understand that the District is protected from liability under the Colorado Governmental Immunity Act for injuries and damages that may arise out of or in connection with participation in the Sport(s), and understand that any injuries and damages that may arise out of or in connection with participation in the Sport(s) may not be covered by District insurance. For these reasons, it is recommended that Student or Parent(s) obtain appropriate insurance from qualified sources to cover medical expenses and other costs that could result from injury to the Student, and damage to or destruction of property belonging to the Student or Parent(s), which may arise out of or in connection with the Student's participation in the Sport(s). The District makes voluntary student accident insurance available through an outside provider. Student or Parent(s) may obtain more information from the Student's school or at <https://www.psdschools.org/risk-management/student-insurance>.

Parent(s) hereby acknowledge and represent (one of the following must be marked):

- I have purchased the voluntary student accident insurance made available through the District.
- I have not purchased the voluntary student accident insurance made available through the District and understand I am responsible for payment of expenses incurred in the event of injury to my son/daughter.

I/We, the undersigned Student and Parent(s) have read this *Middle School Athletic Participation Permission and Release* and understand all of the terms thereof, the nature of the Sport(s) to which they apply, and the risks and dangers that may exist in allowing the Student to participate in the Sport(s). We execute this document voluntarily and with full knowledge of the rights we are giving up and the obligations we are assuming, effective as of the date first above written.

\_\_\_\_\_  
Parent/Legal Guardian Signature      Date

\_\_\_\_\_  
Student Signature      Date

\_\_\_\_\_  
Parent/Legal Guardian Signature      Date

## Nondiscrimination Statement

Poudre School District does not unlawfully discriminate on the basis of race, color, religion, national origin, ancestry, sex, sexual orientation, marital status, or disability in access or admission to, or treatment with respect to participation in District athletics.



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**2021-2022**

**Student Athlete Medical Information**

**Student Information**

Student's Name (Last, First, M.I.) \_\_\_\_\_ PSD Student ID# \_\_\_\_\_  
*(Leave blank if not a current PSD student)*

Student's Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
 Male  Female

Parent(s)/Legal Guardian(s): \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Other Emergency Contact(s): \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Sport(s):  
\_\_\_\_\_

Please list any health and/or medical conditions, including any allergies:  
\_\_\_\_\_  
\_\_\_\_\_

Please list any disabilities and required accommodations and/or restrictions:  
\_\_\_\_\_  
\_\_\_\_\_

Please list all medications the student athlete takes:  
\_\_\_\_\_  
\_\_\_\_\_

Date of Student Athlete's last tetanus booster shot (month/year): \_\_\_\_\_

**Parents are specifically reminded that all medications require a completed PSD authorization form which must be on file in the school office.**

\_\_\_\_\_  
Parent/Legal Guardian Signature      Date

\_\_\_\_\_  
Parent/Legal Guardian Signature      Date



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## 2021-2022 Middle School Physician Certification of Student Fitness for Athletic Participation

*This form, as well as an Athletic Participation Permission and Release form, must be completed and submitted to the school of athletic participation as designated below before the student will be allowed to practice or compete in school sport(s).*

### Student Information – To be completed by student or parent/guardian

Student's Name (Last, First, M.I.) \_\_\_\_\_ Student ID# \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_ Male  Female

Student's Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

School of Athletic Participation \_\_\_\_\_

Parent(s)/Guardian(s) Name(s) \_\_\_\_\_ Telephone \_\_\_\_\_

### Physician's Certification

I certify that I have examined the above-named student and find the student physically fit to fully participate in the school sport(s) listed below, except those crossed out, without restriction:

Basketball	Football	Tennis	Softball	Wrestling
Cross Country	Golf	Track & Field	Volleyball	>SOCO Basketball

>Special Olympics of Colorado

Additional Comments:

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

Date of Examination \_\_\_\_\_ (Valid for 365 days unless rescinded)

Physician Name (Printed) \_\_\_\_\_ Phone Number \_\_\_\_\_

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_



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## 2021-2022 PSD Social Media Policy

Social Media refers to internet-based applications designed to create and share user generated content. All forms of digital magazines, internet forums, web-blogs, podcasts, photographs, video, rating and social bookmarking found on websites or applications such as Twitter, Facebook, Instagram or Tumblr that are open to public viewing are considered to be social media. This is a rapidly changing network and many more not mentioned will arise, which are also included in this policy. Violations of this policy outlined below are subject to investigation and sanctions described in the Poudre School District Code of Conduct and are also subject to review by state and federal law enforcement. These fall under the Poudre School District Code of Conduct. Any and all disciplinary measures may apply, depending on the severity of the infraction.

Poudre School District student-athletes are expected to conduct themselves in a respectable manner as a member of their teams and our Athletic Program. As a student-athlete you are responsible for your social media use. Any malicious use of social media platforms shall not be tolerated. Malicious use may include, but not be limited to:

- 1) Derogatory language or remarks regarding fellow athletes, students, coaches, administrators, faculty and staff of Poudre School District or other high schools.
- 2) Demeaning statements or threats that endanger the safety of another person.
- 3) Incriminating photos or statements regarding illegal criminal behavior, underage drinking, use of illegal drugs, sexual harassment or violence.

As a student-athlete, I have reviewed and carefully read, with my parent(s)/legal guardian(s), the Social Media Policy and agree to abide by all provisions contained within. Furthermore, I understand that violation of said rules may result in loss of athletic privileges and/or suspension from participation.

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Print Student Name

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Student Signature

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Parent/Legal Guardian Signature

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Parent/Legal Guardian Signature

**2021-2022**  
**Supplemental Athletic Participation Permission and**  
**Release for Communicable Diseases Including COVID-19**

**Student Information**

\_\_\_\_\_  
Student's Name (Last, First, M.I.)

\_\_\_\_\_  
PSD Student ID#  
*(Leave blank if not a current PSD student)*

\_\_\_\_\_  
Parent(s)/Legal Guardian(s) Name(s)

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
School of Attendance

\_\_\_\_\_  
Activity

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This Supplemental Athletic Participation Permission and Release for Communicable Diseases Including COVID-19 made this \_\_\_\_ day of \_\_\_\_\_, 202\_\_, is given by the student named above ("Student") and the Student's parent(s)/legal guardian(s) named above ("Parent(s)") in favor of the Poudre School District for the above activity ("activity").

Poudre School District ("District") has put in place preventative measures to reduce the spread of COVID-19 including the requirements and guidelines from the State of Colorado Governor's Office, Colorado Department of Public Health and Environment ("CDPHE"), Larimer County Department of Health and Environment ("LCDHE"), and Colorado High School Activities Association ("CHSAA"). However, attending and participating in the above referenced activity could increase the Student's risk of contracting COVID-19. The Student's participation in and attendance at the activity is voluntary. Student agrees to follow the specific requirements, protocols and guidelines adopted by CHSAA, CDPHE and/or the District for the activity. Failure to follow these requirements, protocols and guidelines may result in school or team consequences that could include dismissal from the activity or further disciplinary consequences.

In consideration of the permission granted by the District for the Student to participate in the activity listed above, and in an effort to ensure the safety and wellness of our school community, the Student and the Student's Parent(s) hereby covenant and agree as follows:

1. Participation may include possible exposure or increase the risk of exposure to COVID-19 and/or other communicable diseases. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. Participation may also result in transmission of COVID-19 or other communicable diseases to non-participants.
2. Student and Parent(s) understand the importance of students being healthy and safe when they participate in the activity. Student and Parent(s) agree that Student will only participate in the activity when healthy. Student and Parent(s) willingly agree to comply with the terms and conditions for participation, including specific requirements, protocols and guidelines in place regarding COVID-19. Student and Parent(s) acknowledge these protocols and guidelines may change due to changes in guidance from CHSAA, CDPHE, LCDHE, or other public health officials. If changes to the protocols or guidelines are made, such changes will be communicated to Student and/or Parent(s).
3. Student and Parent(s) specifically agree to follow the health and safety protocols in place which include, but are not limited to:
  - a. Answering daily COVID-19 specific screening questions, including:
    - i. Have you tested positive for COVID-19?
    - ii. Have you had any known exposure to a COVID-19 positive individual in the past 14 days?

- iii. Have you been tested for COVID-19?
  - iv. Have you had any new onset cough or shortness of breath?
  - v. Have you experienced any recent fever with a temperature of 100.4 degrees Fahrenheit or higher?;
  - b. Participating in daily physical screening, including a temperature check. If Student has a temperature of 100.4 degrees Fahrenheit or higher, Student will not be permitted to participate in the activity;
  - c. Agreeing to report to the appropriate official if Student receives a positive COVID-19 test; and
  - d. Wearing a cloth face covering when required.
4. Student and Parent(s) hereby release, indemnify and hold harmless the District and its board members, employees, authorized volunteers, and agents from any and all liability, claims, causes of action, damages and/or demands of any kind whatsoever (except willful and wanton acts or omissions) that Student and/or Parent(s) may have against the District, its board members, employees, authorized volunteers, and/or agents for any and all damages, including personal injury or illness to the Student, that may arise out of or in connection with Student's participation in the activity. Student and Parent(s) understanding and appreciating the risks that may exist in allowing Student to participate in the activity, further knowingly and voluntarily assume all risks of injury, illness or other harm related to potential exposure to COVID-19 and/or other communicable diseases that may occur during Student(s) participation in the activity.

I/We, the undersigned Student and Parent(s) have read this *Supplemental Athletic Participation Permission and Release for Communicable Diseases Including COVID-19* and understand all of the terms thereof, the nature of the activity to which they apply, and the risks and dangers that may exist in allowing the Student to participate in the activity, including possible exposure or increased risk of exposure to COVID-19 and/or other communicable diseases. We further understand and acknowledge this form is supplemental to and does not supersede the *Athletic Participation Permission and Release* form. We execute this document voluntarily and with full knowledge of the rights we are giving up and the obligations we are assuming, effective as of the date first above written.

\_\_\_\_\_  
 Parent/Legal Guardian Signature      Date

\_\_\_\_\_  
 Student Signature                              Date

\_\_\_\_\_  
 Parent/Legal Guardian Signature      Date