

**OXFORD SCHOOL DISTRICT
224 BRAMLETT BLVD.
OXFORD, MS 38655**

**ATHLETIC DEPARTMENT
MEDICAL AND EMERGENCY WAIVER FORM**

Having given _____ permission to participate in Athletics in the Oxford School District, I assume all medical responsibility in the event of an injury incurred by my child. I also authorize the responsible athletic supervisor, sponsor, or coach to obtain, through a physician of his choice, any emergency medical or subsequent care that may become necessary for the athlete in the course of such athletic activities or such travel.

Having read the above statement, by my signature, I relieve the Oxford School District and all personnel involved of all medical and emergency medical responsibilities. I further understand that unless this form is complete and returned to the Athletic Director, my child will not be allowed to participate in athletics in the Oxford School District.

Signed: _____ Date: _____
(Parent or Guardian)

Signed: _____ Date: _____
(Athletic Director)

Insurance Co. Name: _____

Card Holder and DOB: _____

Group #: _____

ID# of Card Holder: _____

Insurance Co. Phone #: _____

Athlete's SS #: _____

Parent or Guardian Phone #: _____

Covered Athlete: _____
Last First Initial

The above athlete has opted to waive their rights under the U.S. Department of Health and Human Resources guidelines. The above-mentioned athlete is aware that this waiver can be revoked, by submitting in writing the intention of doing so. By signing this release the athlete allows the sharing of medical information between his/her medical provider, physical therapist, athletic trainer, the coaches of athlete's sport and school administration.

Covered Athlete's Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

PARENT AND PLAYER AGREEMENT, PERMISSION, and RELEASE

I DO _____ DO NOT _____ consent to the release of the student's name, photo, voice, video, height, weight, name of school attending, grade level, and athletic position and statistics for public access, including but not limited to, inclusion on District and school websites, and broadcasts in athletic programs.

Parent/Guardian Initials _____