

Parents'/guardians' risk acknowledgement and consent to participation

Cushing Academy Admissions Office tel: (978) 827-7300
PO Box 8000, 39 School Street fax: (978) 827-6253
Ashburnham, MA 01430-8000 USA admissions@cushing.org

Student's Name: _____ Date of Birth: _____
FIRST MIDDLE LAST MONTH/ DAY/ YEAR

My/our child will participate in the athletic program at Cushing Academy during the 2011-2012 academic year. I/we realize that there are risks involved in this participation and understand that the risks include a full range of injuries, from minor to severe. I/we recognize the possibility that my/our child might die, become paralyzed, or suffer brain damage or other serious, permanent injury as a result of participation in the sports program. I/we realize that neither the protective equipment and padding used in a sport, the safety rules and procedures of a sport, the coaching instruction received, nor the sports medicine care provided to athletes will guarantee safety or prevent all injuries they might sustain. I/we agree to accept these risks as a condition of my/our child's participation in the Cushing Academy Athletic Program.

*I also realize that my/our child's _____ creates additional risk,
NAME OF CONDITION

and I/we discussed these risks with the Athletic Director, coach(es), and the sports medicine provider(s) in a meeting on (Date):_____. They explained to me/us that, because of this condition, the special risks for my/our child are:

***For athletes with pre-existing conditions that increase risk of injury/illness. If this section does not apply to you, write "not applicable" in the first space.**

I/we understand these concerns and agree to follow all directions and recommendations of my/our physicians and sports medicine providers in this program. I/we also agree to accept these additional risks as a part of my/our child's participation in the Cushing Academy Athletic Program.

Date: _____ Parent/Guardian Signature: _____
MONTH/DAY/ YEAR

Date: _____ Parent/Guardian Signature: _____
MONTH/DAY/ YEAR

This form must be returned even if the student is not participating in a contact sport.