

# MIDDLE TOWNSHIP MIDDLE SCHOOL PARENT CONSENT

Students Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Sport(s) \_\_\_\_\_ Grade \_\_\_\_\_  
(please include all sports you may participate in this year)

## Parent/Guardian Consent

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. I/we also hereby give permission for my child to participate in:

Fall Sport \_\_\_\_\_

Winter Sport \_\_\_\_\_

Spring Sport \_\_\_\_\_  
(please include any sports that you may wish to participate in this year)

Parent/Guardian Name (print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

N.J.A.C. 6:29-6:4