



Hopatcong Borough Schools

Athlete's Name (Print) _____ **Sport** _____ **Year** _____

Address _____ **Phone** _____ **Class** _____ **H.R.** _____

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.

Have you already completed a parent/athlete contract during this school year? _____ **YES** _____ **NO**

If **YES**, what sport? _____

Signature of Athlete

Signature of Coach

Signature of Parent/Guardian
