

ATHLETIC RESPONSIBILITY ACKNOWLEDGEMENT

Athlete's Name _____ Year _____

Prior to participating in any practice or tryout sessions for any interscholastic sport, each athlete must:

1. Successfully pass a physical examination by a registered physician, within the last year, and a copy of such examination must be on file in the office of the Athletic Director.
2. Return to the Athletic Director the Athletic Responsibility form properly signed.
3. Return to the Athletic Director the properly filled out Parent Permission form.
4. Return to the Athletic Director a signed Concussion Protocol and Cardiac Arrest form

As a Montville High School student athlete participating voluntarily in interscholastic athletics, I understand that:

1. I will abide by the Montville High School's Athletic Handbook, the coach's team rules, and the rules of the CIAC.
2. I will conduct myself in an exemplary social manner at all times.
3. I will be responsible for all athletic equipment issued to me throughout the season, will return such equipment at the conclusion of my season, and will pay the current replacement cost for any of the equipment not accounted for by me at the end of my season.
4. I will not use or be in possession of tobacco, alcohol, or narcotics. If I do use any of these substances, am in possession of such substances, or am suspended from school for use or possession of these substances, I will be subject to disciplinary actions as outlined in the athletic handbook.
5. I acknowledge that I have been properly advised, cautioned, and warned by the administration and coaching personnel of the Montville School District that I am exposing myself to the risk of injury, including, but not limited to, the risk of sprains, fractures, and ligament and/or cartilage damage which could result in temporary or permanent, partial or complete impairment in the use of my limbs, brain damage, paralysis, or even death. Having been so warned, it is still my desire to participate in sports and to do so with full knowledge and understanding of the risk of injury.
6. I, along with my parents, certify that we have read and understand all of the MHS Athletic Department policies in the Athletic Handbook and that in order to be eligible in participation, I must comply with all requirements listed.

Athlete's Signature _____ Date _____

Parent's Signature _____ Date _____