



CHIME Charter Middle School
Sports Medicine Release Form

Student Name: _____

Grade: _____ Date: _____

Current Sport: _____

Medical Consent/Permission to Treat: I give permission to CHIME Charter Middle School Sports Staff and/or consenting physicians to render any treatment that may be necessary to the health and well being of my child. I realize that I am authorizing the Certified Medical Trainer to render care under the headings of preventions, recognition, assessment, management, treatment, disposition, and reconditioning of athletic injuries. During these instances, the Certified Athletic Trainer will be working under the supervision of a licensed physician and/or your child's own family physician and/or surgeon, osteopathic physician or surgeon, podiatrist or chiropractor.

Signature of Parent/Guardian

Date

Authorization of Release of Information: I am authorizing the release of medical information on my child by or to the Certified Athletic Trainer, school physician(s), and/or your child's own family physician and/or surgeon osteopathic physician or surgeon, podiatrist or chiropractor, concerning my child's health, welfare, or status for participation in athletics currently or in the future. This may include case history records, laboratory reports, diagnoses, x-ray, and any other data covering this injury and/or other disabilities under the "minimum necessary" rule of the Health Insurance Portability and Accountability Act of 1996. This authorization does not authorize records for the release of HIV, psychiatric, and substance abuse records. A photocopy of this authorization shall be deemed effective and valid as the original. This information may relate to injury or illness sustained in the past, present and/or any possible complication that may or already have occurred while participating in athletics at CHIME Charter Middle School. This may include disclosure of information about your child's injury to their coaches. This authorization shall remain in effect for the current school year only.

Signature of Parent/Guardian

Date

Signature of Student

Date



CHIME Charter Middle School

ACKNOWLEDGEMENT OF RISK AND INFORMED CONSENT FOR
INTERSCHOLASTIC ATHLETIC PARTICIPATION

I am aware that play/participation in any sport, competitive or otherwise, including _____ and events incidental thereto including but not limited to tryouts, practices, transportation to and from these activities, can be dangerous involving **MANY RISKS OF INJURY**. I understand that the risks and dangers include, but are not limited to: death or paralysis, brain damage, cardiac arrest, serious injury to internal organs and bones, joints, ligaments, muscles, tendons and other serious injury or impairment to other aspects of the athlete's general physical and emotional health and well-being. I understand that the dangers and risks of participating in sports also include the potentially high cost of medical care and impairment of the athletes' future ability to earn a living, and to engage in other business, social, and recreational activities. Recognizing and assuming these risks, I consent to the participation of:

_____ in the sport of _____
(Student's Name – Please Print) (Grade) (Current Sport)

for the current school year at CHIME Charter Middle School. I understand that this consent applies to participation in said athletic activity and events incidental thereto including but not limited to tryouts, practice, games, and transportation to and from these activities. Because of the dangers of participating in the above named sport, we recognize the importance of following coaches' instructions regarding playing techniques, training, and other team rules, as well as obeying such instructions.

BOTH THE APPLICANT STUDENT AND A PARENT OR LEGAL GUARDIAN MUST READ CAREFULLY AND SIGN. IF THERE ARE QUESTIONS, PLEASE CONTACT THE CHIME CHARTER MIDDLE SCHOOL OFFICE (818) 998-6794.

Parent/Guardian (Please print) _____

Signature of Parent/Guardian _____ (date)

Signature of Student: _____ (date)

The original of this form is to be kept on file at CHIME Charter Middle School along with other athletic paperwork. A new form shall be signed for each school year and each enrolled sport.