

## **ATHLETIC CODE OF CONDUCT AGREEMENT**

**I/we have read the rules and regulations of the Martins Ferry Athletic Code of Conduct and agree to support the rules. I/we will encourage our child to abide by those rules.**

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**Signature of Parent/Guardian**

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**Date Signed**

**I have read the rules and regulations of the Martins Ferry Athletic Code of Conduct and agree to abide by the regulations.**

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**Signature of Athlete**

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**Date Signed**

## **PARENT/GUARDIAN CODE OF CONDUCT AGREEMENT**

**I/We have read the above Parent/Guardian Code of Conduct and agree to abide by and support the rules.**

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**Signature of Parent/Guardian**

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**Date**

**STUDENT CONSENT TO PERFORM DRUG AND/OR ALCOHOL TESTING**

**I have read the rules and regulations of the Martins Ferry City School District's Drug and Alcohol Testing Policy and agree to abide by the rules. I give consent to be tested under this policy.**

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**Signature of Athlete**

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**Date Signed**

**PARENT/GUARDIAN CONSENT TO PERFORM DRUG AND/OR ALCOHOL TESTING**

**I/we have read the rules and regulations of the Martins Ferry City School District's Drug and Alcohol Testing Policy and agree to abide by the rules. I/we give consent for our child to be tested under this policy.**

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**Signature of Parent/Guardian**

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**Date Signed**

## **SOCIAL MEDIA POLICY CONSENT FORM**

**I have read the above Social Media Policy and accept my responsibility as a student-athlete in the Martins Ferry City School District.**

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**Signature of Student**

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**Date**

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**Signature of Parent/Guardian**

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**Date**

STUDENT ACKNOWLEDGEMENT OF RISK AND RELEASE

I, \_\_\_\_\_ (Name), hereby acknowledge that I have been properly advised, cautioned, and warned by the proper administrative and coaching personnel of the \_\_\_\_\_ (School District) that by participating in the sport of \_\_\_\_\_ (Sport) I am exposing myself to the risk of serious injury, including but not limited to, the risk of sprains, fractures and ligament and/or cartilage damage which could result in a temporary or permanent, partial or complete impairment in the use of my limbs; brain damage; paralysis; or even death. Having been so cautioned and warned, it is still my desire to participate in the above sport, I hereby further acknowledge that I do so with full knowledge and understanding of the risk of serious injury to which I am exposing myself by participating in the above sport.

I hereby release, discharge, and/or otherwise indemnify the \_\_\_\_\_ School District, and their employees against any claim by me on my behalf as a result of my participation in the sport of \_\_\_\_\_ (Sport).

WITNESSES:

(Sign) \_\_\_\_\_ (Student Sign) \_\_\_\_\_

(Print) \_\_\_\_\_ (Student Print) \_\_\_\_\_

(Sign) \_\_\_\_\_ (Date) \_\_\_\_\_

(Print) \_\_\_\_\_

PARENT ACKNOWLEDGEMENT OF RISK AND RELEASE

We/I, the parent(s) of \_\_\_\_\_ (Student), do hereby acknowledge that we/I have been fully advised, cautioned, and warned by the proper administrative and coaching personnel of the \_\_\_\_\_ (School District) that our/my child named above, may suffer serious injury, including but not limited to sprains, fractures, brain damage, paralysis, or even death, by participating in the sport of \_\_\_\_\_ (Sport) notwithstanding such warnings, and with full knowledge and understanding of the risk of serious injury to our/my child named above which may result, we/I give our/my consent to \_\_\_\_\_ (Child) participating in the sport of \_\_\_\_\_ (Sport).

We hereby release, discharge, and/or otherwise indemnify the \_\_\_\_\_ School District, and their employees against any claim by/or on behalf of the registrant as a result of the registrant's participation in the sport of \_\_\_\_\_ (Sport).

WITNESSES:

(Sign) \_\_\_\_\_ (Parent Sign) \_\_\_\_\_

(Print) \_\_\_\_\_ (Parent Print) \_\_\_\_\_

(Sign) \_\_\_\_\_ (Parent Sign) \_\_\_\_\_

(Print) \_\_\_\_\_ (Parent Print) \_\_\_\_\_

Date \_\_\_\_\_