



**Gilbertsville-Mount Upton Central School  
Athletics – Risk of Injury Statement**

**FOR STUDENT ATHLETES AND PARENTS**

**RISK OF INJURY STATEMENT**

**To the Student**

I am aware that competing or practicing in any athletic endeavor can be a dangerous activity involving risk or injury that includes, but is not limited to, death, neck and spinal injury which may result in complete or partial paralysis, brain damage, injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the muscular-skeletal system. Such injuries may impair future abilities to earn a living, engage in business, social and recreational activities and generally enjoy life.

If I am a participant in baseball, softball, soccer or basketball, I specifically acknowledge that it is a contact sport involving even greater risk of injury than other sports.

Because of the possible dangers of participating in the activities, I recognize the importance of the coaches' instructions regarding playing techniques, training and other team rules and agree to obey such instructions.

In consideration of the school district's permitting me to engage in all activities related to the team including, but not limited to, trying out, practicing or participating in an interscholastic contest, I hereby assume all the risks associated with participation.

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**To the Parent/Guardian**

I have read the Risk of Injury Statement and acknowledge awareness of the various risks set forth in the statement and, considering such risk, give permission for my child to participate in an extracurricular athletic event. If I withdraw permission for the student to participate in an extracurricular athletic event, the withdrawal must be in writing and given to the principal, as well as the coach of the particular activity.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_