

**WARRENSBURG-LATHAM COMMUNITY SCHOOL DISTRICT #11  
ATHLETIC HANDBOOK AGREEMENT FORM**

**Please sign in all 3 places. ATHLETES PRINTED NAME:** \_\_\_\_\_

**1. TO THE STUDENT ATHLETE AND PARENT/GUARDIAN:**

I have read the Athletic Department Handbook and will abide by the rules and regulations contained therein. I further understand that infractions of these rules and other rules that the coach may stipulate will result in penalties up to removal from the team or squad.

\_\_\_\_\_  
Signature of student-athlete                      Date                      Signature of parent-guardian                      Date

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**INSURANCE WAIVER FORM**

**2. STATEMENT OF FINANCIAL RESPONSIBILITY FOR ATHLETIC INJURIES**

**CHECK ONE:**

\_\_\_\_\_ student listed below is covered for all injuries incurred while participating in (ALL SPORTS) by our own health insurance carrier.

**\*\* The free student accident insurance covers as secondary insurance, accidents while at school and for participation in all sports, excluding football.**

\_\_\_\_\_ I have enclosed money to pay for the insurance premium for only football coverage.

\_\_\_\_\_  
Signature of student-athlete                      Date                      Signature of parent-guardian                      Date

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**3. IHSA STERIOD TESTING POLICY CONSENT TO RANDOM TESTING**

In January 2008, the Illinois High School Association's Board of Directors approved a plan developed by the IHSA's Sports Medicine Advisory Committee to implement random testing for steroids and performance-enhancing dietary supplements of teams and individuals qualifying for state finals competition.

Beginning with the 2008-09 school term, any student-athlete who ingests or otherwise uses substance from the association's banned drug classes, without written permission by a licensed physician, to treat a medical condition, violates IHSA By-Law 2.170 and its subsections, and is subject to IHSA penalties, including ineligibility from competition. The IHSA will test certain randomly selected individuals and teams that participate in state series competitions for banned substances. The results of all tests shall be considered confidential and shall only be disclosed to the student, his or her parents, and his or her school.

By signing below, we consent to random testing in accordance with the IHSA's steroid testing policy. We understand that, if the student or the student's team participates in state series competitions, the student may be subject to testing for banned substances.

**No student-athlete may participate in IHSA state series competitions unless the student and the student's parent/guardian consent to random testing.**

A complete list of the current IHSA Banned Drug Classes can be accessed at [http://www.ihsa.org/initiatives/sportsMedicine/files/IHSA\\_banned\\_list-2007-08.pdf](http://www.ihsa.org/initiatives/sportsMedicine/files/IHSA_banned_list-2007-08.pdf).

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Signature of student-athlete                      Date                      Signature of parent-guardian                      Date