

Prairie Ridge High School

Extracurricular Consent and Permission Form

Student Name _____
Address _____
City _____
Zip _____
Home Phone Number _____
Mother's Name _____
Father's Name _____

Id # _____
Year in School _____
Birth Date _____

Work Phone Number _____
Work Phone Number _____

I have read and understand the Extracurricular Eligibility and Code of Conduct for Prairie Ridge High School and District #155. I agree to abide by these codes and cooperate with the school in enforcement of these codes.

I understand that violation of any Prairie Ridge High School regulation will result in immediate action as stated. I also understand that these rules may change. An updated version of these rules appears each year in the Student Handbook or may be obtained from the Theater Department.

By signing below, I give permission for my child to participate in the student activities program. I am aware that the school is not liable for any injuries my child may receive while participating in these activities. I further consent to any treatment deemed necessary by a licensed physician designated by the person in charge for any injury resulting from his/her participation in student activities. I understand that every effort will be made to notify the parent/guardian to explain the nature of the problem prior to any involved treatment.

Signature of Student _____ Date _____

Signature of Parent/Guardian _____ Date _____