

Student Participant Contract

I _____, have chosen to participate in
(Student's Printed First & Last Name)

_____ at _____
(Sport) (School Name)

I commit myself to continuously work toward the goal of top physical fitness. To do anything which would harm my body would not be in my best interest or the best interest of my team and school. I agree to remain free from tobacco, alcohol, steroids and other performance-enhancing or recreational drugs during my sports season and throughout the entire school year. I fully understand this pledge extends to seven days per week. If I have a problem or I need help fulfilling this contract, I understand the coaches, administrators and/or counselors will be available to help me.

***I have read and understand the athletic policies/code of conduct and the consequences for violations of these policies or codes. ***

***I pledge to follow all the rules and policies and to help all my teammates abide by the same athletic rules and policies. ***

(Student's Signature) (Date)

As the parent/guardian of _____,
(Student's Printed Name)

I understand and support this contract and pledge that my student has signed. Optimum health and education are the goals of our athletic program, and I support the school in its efforts to attain these goals.

(Parent/Guardian Signature) (Date)