

## Warwick Extra Curricular Contract

Student Name: \_\_\_\_\_

Sport/ Activity: \_\_\_\_\_

We have read and understand the Substance Abuse Regulations:

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Participant                      Date

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Parent/Guardian                      Date

We have read and understand the Tobacco Regulations:

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Participant                      Date

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Parent/Guardian                      Date

We have read and understand the Academic Regulations:

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Participant                      Date

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Parent/Guardian                      Date

We have read and understand the Warning, Agreement to Obey Instructions, Release, Assumption of Risk Statement and agree to hold Warwick School District, collectively and individually, its employees, agents, representatives, medical personnel, coaches, volunteers, including managers and trainers, harmless from any and all liability, actions, causes of actions, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with participation in any activities related to the Warwick athletic teams. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Participant                      Date

\_\_\_\_\_/\_\_\_\_\_/20\_\_  
Signature of Parent/Guardian                      Date