

Pleasant Valley School District



**INTRAMURAL ACTIVITY  
STUDENT APPLICATION & PARENT/GUARDIAN CONSENT**

Student Name: \_\_\_\_\_  
(Please Print)

Grade: \_\_\_\_\_

I hereby make application to participate in Dodgeball

(Intramural Activity)

on 11/2/18.

(Day(s) of the week)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

***Parent/Guardian consent is required for student to participate in the above-named activity.***

I agree to permit my \_\_\_\_\_,  
Son/Daughter/Ward

\_\_\_\_\_  
Student/Applicant Full Name

to participate in Dodgeball

(Intramural Activity)

on 11/2/18

(day/s of the week)

I recognize that hazards may be encountered and neither the school nor any school authority will be held responsible in case of personal injury.

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

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

Telephone Numbers:

\_\_\_\_\_  
(HOME)

\_\_\_\_\_  
(CELL)

\_\_\_\_\_  
(WORK)

Parent/Guardian, please **initial** one of the following:

\_\_\_\_\_ I have already purchased school insurance for my child this school year.

\_\_\_\_\_ I have other insurance coverage as indicated below:

Name of Insurance Carrier \_\_\_\_\_

Policy/Agreement Number \_\_\_\_\_