SPORT:				
PORTLAND PUBLIC SCHOOLS ATHLETIC PERMISSION FORM – Sport/Activity Warning, Agreement to Obey Instructions, Report Injuries, and Parental Permission				
	the above co-curricular activity includes the risk of serious injury. Indvisors' instructions regarding playing and training techniques, team			
I agree to report all injuries to me to my coach, advisor, or pri	ncipal within 24 hours of their occurrence.			
Signature of Student:	Date:			
I, the parent/guardian of	, understand the dangers and risks			
involved in the co-curricular activity as indicated above. Reco	gnizing those dangers and risks, I give permission for			
	ivity/sport. I also understand that before a student can participate in			
Signature of Parent/Guardian:	Date:			
Co-Curricular Code of	of Conduct – District Policy			
The Portland Public School Co-C	urricular policy can be found on this link:			
https://www.portlandschools.org/con	nmon/pages/DisplayFile.aspx?itemId=7044882			
By their signature, students and their parents acknowledge Handbook and Athletic and Co-Curricular Activities Code of Counder this code by a coach, activity advisor, or co-curricular	that they understand and agree to adhere to the PPS Co-Curricular onduct for Middle and High School Students. Disciplinary action taken administrator may be appealed to the principal of the school. It is have additional rules and regulations for their students in areas not			
<b>Note:</b> This form is for student participation in extramural or int student's Co-Curricular Administrator <b>before the student is eli</b>	ramural co-curricular activities. It must be signed and returned to the gible to participate in the sport/co-curricular activity.			
I Have Read and Understand the Code of C	Conduct and by my signature agree to abide by it.			
Signature of Student:	Date:			
	ODE TO WHICH THE STUDENT IN MY CUSTODY BY HIS/HER SIGNATURE			
Signature of Parent/Guardian:	Date:			

PPS Assumption of Risk and Waiver re. Communicable Diseases & COVID-19
Please read, sign and return before the first day of Intramurals

By signing this agreement with PPS, I acknowledge the risks associated with participation in athletic/co-curricular activities and the possible contraction of COVID-19 or other communicable diseases and wish for my child (or me/staff - named below) to participate in these PPS Middle School activities.

Sign	nature of Parent/Guardian:	Date:	
۵.۵.	iatare or rareint, caararan	 	