

## NorKam Boys Rugby

In accordance with the School District No. 73 (Kamloops/Thompson) Board Policy, informed parental consent is required in order for your son to participate in our rugby program. Please complete the medical and informed consent sections of this form and return signed forms to Mr. Sjokvist or Mr. Francis. This form is confidential.

Rugby, by the sheer nature of the sport, involves some inherent risk. Proper measures will be taken to instruct your son about safety in contact and important postural tips will be reviewed and reinforced during training sessions. Attendance at these training sessions, therefore, is an important part of player accountability. Attendance will be taken at practice.

Please note that any serious musculo-skeletal deficiencies, serious abdominal or cardiac conditions, chronic or acute organ conditions and recurrent head injuries may disqualify your child from participation in this contact sport.

School District no. 73 (Kamloops/Thompson)		
Parent Informed Consent for participation in Athletic Activities		
Athlete Name:	Date of Birth:	Age:
Address:		
Primary Parent Emergency Contact and Daytime Pho	ne #:	
Family Doctor and Phone #:		
Current Medical Conditions including allergies:		
Previous Sports or Relevant Injuries:		
In my opinion	is fit for participation in this cont	act sport.
I have read this form and give my permission for my		
contact sports.		
Parent signature:	Date:	