



Participant Agreement, Consent, Release, and Venue

This form is valid for the _____ school year and must be on file at the school in which the student is enrolled prior to participation.

Part 1. Student Agreement, Consent, And Release (to be signed by student at the bottom)

A. I know of no reason why I am not eligible to represent my school in interscholastic athletic competition. If accepted as a representative, I agree to follow the rules of my school and the Arkansas Activities Association (AAA) and to abide by their decisions. I know that athletic participation is a privilege. I know of the risks involved in athletic participation and choose to accept such risks. I hereby authorize the use or disclosure of my individually identifiable health information should treatment for illness or injury become necessary. I also authorize physicians or other designated medical professionals associated with the AAA to review my individually identifiable health information for the purpose of determining my eligibility to participate in certain athletic events. I further authorize the disclosure of my individually identifiable health information by any physician performing such examination to appropriate AAA and/or school officials or other health care officials involved in determining eligibility for participation in athletic events. I hereby consent to the disclosure by my school to AAA, upon its request, and hereby grant AAA the right to review all records including my SSID number relevant to my athletic eligibility including, but not limited to, my official transcripts, and records relating to enrollment and attendance, academic standing, age, discipline, residence and physical fitness. This Consent includes granting AAA the right to review all records otherwise protected by the Family Educational Rights and Privacy Act and all official transcripts provided to my school from any school. I hereby grant the released parties the right to photograph and/or videotape me and further to use my name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising, promotional and commercial materials without reservation or limitation. The released parties, however, are under no obligation to exercise said rights herein.

Part 2. Parental Agreement, Consent, And Release (to be completed and signed by a parent(s) at the bottom; where divorced or separated, parent with legal custody must sign.)

A. I hereby give consent for my child to participate in any AAA recognized or sanctioned sport EXCEPT for the following sport(s): _____

B. I know of, and acknowledge that my child knows of, the risks involved in interscholastic athletic participation. I authorize emergency medical treatment for my child should the need arise for such treatment while my child is under the supervision of the school. I further hereby authorize the use or disclosure of my child's individually identifiable health information should treatment for illness or injury become necessary. I consent to the disclosure, by my child's school, to the AAA, upon its request, of all records relevant to his/her athletic eligibility including, but not limited to, his/her records relating to enrollment and attendance, academic standing, age, discipline, residence and physical fitness. I grant the released parties the right to photograph and/or videotape my child and further to use said child's name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising, promotional and commercial materials without reservation or limitation. The released parties, however, are under no obligation to exercise said rights herein.

Part 3. Litigation

A. VENUE FOR ANY AND ALL LITIGATION AND ATTORNEY FEES. I agree that in the event I, or anyone acting on my child's behalf, files suit against AAA or any of its officers, directors, agents, or employees alleging any cause of action and seeking either legal or equitable relief impacting my child (individually) or my child's team participation in AAA contests, such action shall be filed in the Pulaski County, Arkansas, Circuit Court. I also agree that filing such action in the Pulaski County Circuit Court is both fair and reasonable.

I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A RELEASE AND VENUE CLAUSE (Only one parent/legal primary custodian signature is required)

Parent Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Student Signature: _____

Date: _____