

Eagle

Excellence in Education



ATHLETIC PERMISSION FORM

BIBLE BAPTIST CHRISTIAN SCHOOL

Student's Name: _____

We give permission for our son/daughter to participate in the Athletic Program at BBCS. Participation in athletic events may increase a child's potential for injury. We understand that we are hereby releasing the school of responsibility for injury to our child in relation to transportation, practice, and participation for the above activity.

We have insurance coverage for our child that covers sports injuries.

We understand that Bible Baptist Christian School is not responsible for covering or providing insurance in order for our child to participate. We do have adequate hospitalization coverage for our child.

We agree to support the coach and school in enforcement of discipline and practice regulations.

We understand a uniform will be issued to each player. It is the student's responsibility to take care of the uniform. If the uniform is damaged due to neglect, we understand we will be billed for the replacement cost.

We understand an athletic physical is required to participate in the BBCS sports program and must be submitted to BBCS **before the first practice** of each sport season.

We agree to the above stated terms and conditions of the BBCS Athletic Program.

Parent/Guardian Signature

Date

WWW.BIBLEBAPTISTCHRISTIANSCHOOL.COM

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