

## **Middle Level Intramural Registration**

Education involves the process of living in the present, understanding the past, and preparing for the future. Education is a lifelong pursuit of learning and sharing with others. During the middle level years, students will experience not only significant, but often the most dramatic, physical, social, intellectual, and emotional changes in life. The middle level program design provides the student with the basic skills of inquiry and successful experiences in exploration and enrichment.

The intramural program provides an introduction to athletics with an emphasis on participation and enjoyment of physical activity while participating on a team. The program offers approximately two weeks to practice and learn an activity.

**REGISTRATION** Students are required to register for each intramural season at the school. Parents should contact the school directly for information regarding the registration dates.

**The Lake Washington School District highly recommends a valid physical prior to participation in an intramural sport!** However, the district minimally requires submission of the intramural permission form.

All forms must be signed by the athlete and parent and returned to the school with the registration fee **PRIOR to participating**. Forms are available in each middle school throughout the year.

**FEES** Participants in intramural sports are assessed a \$25 fee per sport- NON REFUNDABLE.

Student Name \_\_\_\_\_ Grade \_\_\_\_\_  M or  F

**INTRAMURAL ATHLETIC INSURANCE WAIVER**

For any student participating in school sports or any other school activity parents are encouraged to have some insurance in place prior to the athletic season. I understand that the Lake Washington School District **does not provide accident insurance**. Check with the school office for student insurance.

: CHECK ONE

I have purchased one of the accident insurance plans offered by **Myers/Stevens/Toohey** available in the school office.

OR

I have other accident insurance coverage.

OR

I do not have insurance and I will assume responsibility for payment of expenses incurred in the event of injury to my son/daughter.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(parent/guardian)

**PARENT PERMISSION**

**\*\* WARNING: By its nature, participation in INTRAMURALS includes a risk of injury, this may range in severity from minor to long-term catastrophic.**

Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate this risk. Participants can and have the responsibility to help reduce the chance of injury. PLAYERS MUST OBEY ALL SAFETY RULES, REPORT ALL PHYSICAL PROBLEMS TO THEIR COACHES, FOLLOW A PROPER CONDITIONING PROGRAM, AND INSPECT THEIR OWN EQUIPMENT DAILY.

By signing this Permission Form, we acknowledge that we have read and understand this warning. PARENTS AND/OR STUDENTS WHO DO NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS WARNING MAY NOT TURN OUT FOR INTRAMURALS.

*I hereby give my consent for \_\_\_\_\_ to participate during the current school year in the following intramural sport \_\_\_\_\_*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(parent/guardian)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(student)

