

Dear Parents,

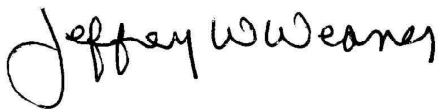
Congratulations on choosing to place your child in a school-sponsored sport. Athletic involvement is proven to have a positive effect on a student's academic achievement, and is an important part of a youth's physical, emotional and social well being. We encourage and support student athletic participation as a compliment to our academic program in the Upper Arlington City School District.

The health and safety of our student athletes is our top priority. With this in mind, we ask that all students who participate in a school-sponsored sport adhere to a Code of Conduct. This Code is designed to assist student athletes and parents/guardians in the identification of potential concerns, and intervention and assessment strategies related to prohibited substances.


Please take a moment to review this publication with your child. Following your review, sign the form below and return to the Athletic Director's office. Your immediate response will enable your child to participate in his or her sport(s) at the start of its season.

Your time and attention are greatly appreciated.

Sincerely,



Jeffrey W. Weaver, Ph.D.
Superintendent of Schools



Mr. Kip Greenhill
Principal, UAHS

(cut along dotted line)

After reviewing the Athletic Code, this sheet must be signed and returned along with your consent and all medical forms. Send to:

**Upper Arlington High School
Attention: Athletic Director
1650 Ridgeview Rd.
Upper Arlington, OH 43221**

Student Athletic (please print information)

Sport _____

Agreement:

I am or will be a student athlete as defined by the Athletic Code or the Upper Arlington City School District. I have read the Athletic Code, which is presented on the preceding pages. I agree that I will follow the Athletic Code. I further understand that any violation of the Athletic Code may result in discipline consistent with the Code including my immediate removal from an athletic team(s).

Student's Athlete Signature

Date _____

I, parent/guardian of the above student athlete, hereby grant my child permission to participate in the athletic program of the Upper Arlington City School District and acknowledge that I have received a copy of the Athletic Code presented on the preceding pages. I recognize that as a student athlete, my child is representing the Upper Arlington City School District and is expected to follow the Athletic Code. I understand that any violation of the Athletic Code may result in discipline consistent with the Code including immediate removal from an athletic team(s).

Parent/Guardian Signature

Date _____

Parent/Guardian Name (please print)