



# PROVIDENCE HALL ATHLETICS

4557 PATRIOT RIDGE DRIVE | HERRIMAN, UT 84096  
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## ACKNOWLEDGEMENT OF RISK INFORMED CONSENT for PARTICIPATION in PHHS Clubs/Events 2020-2021

The following form is to be completed and signed, and submitted by every student and parent/guardian prior to student participation.

Name of Student:

Club/Activity: National Honor Society

### Statement of Consent and Acknowledgment

By signing below I hereby consent to the above named student participating in clubs or activities at Providence Hall High School. This consent includes an active participation in an in-person classroom setting for meetings and/or activities held on the school premises in proximity with teachers and other participants.

By signing, I hereby acknowledge that I consent, and that I have been advised, cautioned, and warned by school officials about the risks associated with participation in school sanctioned events and/or activities where injuries or illness could occur. I am fully aware that participation in such events and/or activities exposes students to the risk of **illness and even death**. I understand that school instruction, protective equipment, and medical care provided do not eliminate these risks. I have addressed any questions or concerns with school officials, instructors, or advisors. Having been so cautioned and warned, it is still my desire to allow the above named student to participate in this school activity/event, and I do so with full knowledge and understanding of the risks involved.

As a parent/guardian, I understand that it is my responsibility to ensure that the above named student is not exhibiting symptoms of a transferable illness, which include, but are not limited to a fever and/or cough before allowing his or her participation in the event and/or activity.

Signature of Participant: \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_