

FATHER MCGIVNEY CATHOLIC HIGH SCHOOL

ATHLETIC WAIVER FORM

The Father McGivney requires that all athletes have proof of insurance before they can compete in any sport. This can either proof of family insurance coverage or insurance that is offered by the diocese. This must be on file before any athlete is allowed to participate in any practices or games.

This form will be good for one calendar year and will cover the athlete for all sports they participate in. The school and the state require that all athletes have a current physical on file (examination date cannot exceed 395 days.)

_____ 1. We will provide our own insurance

_____ 2. We will purchase insurance offered through the diocese

Insurance Company: _____

Please attach a proof of insurance.

We agree that in the case of an accident or injury, we will not hold the Father McGivney Catholic High School or its designated representatives responsible. We certify that the above insurance information is accurate to date.

Student: _____ **Grade:** _____ **Date:** _____

Parent/Guardian Signature: _____

Address: _____

Phone: _____