



MORRISTOWN SCHOOL DISTRICT #75  
25950 West Rockaway Hills Drive  
P.O. Box 98  
Morristown, Arizona 85342  
623-546-5100

### Sports Activity Permission Form 2023-2024

Dear Parent(s)/Guardian(s): A new school year is here and we are ready to begin our extra-curricular sports activities at Morristown School. Attached you will find an activity permission form. Complete one of these forms for each child in grades 5-8 who will be participating in extra-curricular sports during the 2023 – 2024 school year.

All students must furnish proof of medical insurance before participating in extra-curricular sports. A “Request for Waiver of Student Athletic Insurance” is attached and should be filled out and returned if you have personal family health and accident insurance. If your child has no medical coverage, you may use the insurance plan that is available through the school. Bus transportation will be available to and from games and related activities. Students do have the option of riding the 4:25 PM bus after practices if their homes are on the bus route. When sports activities last beyond the 4:25 PM bus run, parents must make transportation arrangements for pick-up of their children from the school. Students can only be transported by someone on their emergency form. I am optimistic that our upcoming athletic seasons in 2023 - 2024 will be rewarding for all participants. Thank you for your cooperation in helping the Morristown Mustangs be the best we can be!

If you have any questions or concerns, please contact me at 623-546-5100..

Sincerely,

Dr. Jennifer Petty  
Morristown Elementary School District  
Superintendent/Principal



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I give permission for \_\_\_\_\_ to participate in the following sport activity at Morristown School during the 2023 - 2024 school year:

- Basketball (TBD)
- Volleyball (TBD)
- Track (TBD)
- Archery (TBD)

I understand that my child will be under school supervision but neither the school district nor those in charge shall be held responsible in case of accident. The above named student has my permission to travel to and from scheduled games. I understand from the student handbook, that my child must have school insurance or "Request for Waiver of Student Athletic Insurance" on file at the school before participating in extra-curricular sports activities.

I understand that it is my responsibility to arrange transportation home for my child after practices, games, and related activities when bus transportation is not available.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

THE REGULAR AFTER SCHOOL PERMISSION FORM MUST BE COMPLETED FOR THE STUDENT, IN ADDITION TO THE SPORTS PERMISSION FORM, TO BE ELIGIBLE FOR SPORTS PARTICIPATION.

I HAVE COMPLETED THE FORMS AS INDICATED BELOW:

\_\_\_\_\_ REQUEST FOR WAIVER OF STUDENT ATHLETIC INSURANCE – (REQUIRED)



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REQUEST FOR WAIVER OF STUDENT ATHLETIC INSURANCE

NAME OF STUDENT \_\_\_\_\_  
Full Legal Name

I understand Morristown Elementary School District requires all students participating in sports be covered by an insurance program. Fully understanding and accepting all responsibility, and absolving the Governing Board and the School District of such responsibility, I hereby request my personal family health and accident insurance be acceptable to the Governing Board and the School District in lieu of the required insurance for my son/daughter/ward. I further accept full responsibility for all obligations, financial or otherwise, which may result from injuries, athletic or otherwise, and occurring during the 2023 - 2024 school year to

\_\_\_\_\_  
(Student Name)

I further certify that I have read and fully understand my present health and accident insurance policy and am aware of its coverages and limitations in relation to injuries received as a result of participation in the athletic program by the aforementioned member of my family.

The insurance is carried with: \_\_\_\_\_  
Policy Number: \_\_\_\_\_  
Agent servicing Policy: \_\_\_\_\_

\_\_\_\_\_  
Parent or Legal Guardian Signature Date

\_\_\_\_\_  
Parent or Legal Guardian Signature Date

Note: **Please have all parents or legal guardians sign this form.**

This form is to be filled out before the student will be allowed to participate in athletics, either at practice or on a competitive basis, if school insurance is not on file.