

**BLIND BROOK MIDDLE/HIGH SCHOOL**  
**INTERSCHOLASTIC ATHLETIC OFFICE**

**PARENTAL CONSENT FOR PARTICIPATION IN**  
**INTERSCHOLASTIC ATHLETICS**

**No student may engage in interscholastic athletic competition unless the athletic department has on file this consent signed by a parent authorizing his/her child to participate.**

I hereby authorize my child \_\_\_\_\_ to  
participate in interscholastic sports during the school year \_\_\_\_\_ as part of the  
interscholastic athletic program of the Blind Brook schools.

**TO AVOID ANY DELAYS IN OBTAINING A SPORT CLEARANCE CARD ON**  
**OPENING DAY**  
**PLEASE SUBMIT TO THE ATHLETIC OFFICE AS SOON AS POSSIBLE**

Date \_\_\_\_\_ Parent's Signature \_\_\_\_\_