



Student Name: _____

Student ID #: _____

Sports: _____

GLENDALE UNION HIGH SCHOOL DISTRICT
ATHLETIC DEPARTMENT
SAFETY VIDEO FORM AND PARENT PERMISSION FOR PARTICIPATION

_____ We certify that we have viewed the GUHSD Sports Safety video in its entirety and understand the contents thereof.

_____ We certify that we will abide by all of the recommendations of the GUHSD Sports Safety video.

Sports YOU MAY ONLY CHECK ONE PER SEASON

FALL SEASON

- Badminton
- B Cross Country
- G Cross Country
- Football
- B Golf
- G Golf
- Spiritline
- B Swim / Dive
- G Swim / Dive
- Volleyball

WINTER SEASON

- B Basketball
- G Basketball
- B Soccer
- G Soccer
- Wrestling

Have you attended any other High School?

_____ YES
_____ NO

SPRING SEASON

- Baseball
- Softball
- B Tennis
- G Tennis
- B Track
- G Track

If Yes, Did you participate in sports? If so, which sports?

_____ YES
_____ NO

If you participated in sports at another high school, which sports did you participate in?

Student Name (Print)

Grade

Student Signature

Parent Signature

Signature Gives Permission to Participate in All Sports Checked Above

Date