



SEDALIA SCHOOL DISTRICT AGREEMENT FOR PARTICIPANT IN ATHLETIC ACTIVITIES PROGRAMS

Student Agreement

If I am selected to represent the Sedalia School District, I will sincerely endeavor to contribute my best to the success of that program. I understand that I represent my family, school, and community. I understand that my participation in the Sedalia School District Athletic/Activities program is not a right, but a privilege. It is important that I present a positive image and serve as a role model for others. Therefore, I agree to abide by the provisions of this handbook and in particular the “Code of Conduct” as approved by the Board of Education. I am also aware that if I do not live up to this agreement, I must accept the consequences for my behavior, which may include dismissal from the athletic/activities program(s).

I realize that if school policies are violated, the procedure and penalties of those policies will be enforced.

By signing this document, I acknowledge that I have read and understand the Athletic/Activities Handbook as approved by the Board of Education.

Student Name (please print or type): _____

Student’s Signature: _____

Date Signed: _____

Grade Level: _____

Parental/Guardian Agreement

By signing this document, I acknowledge that I have read the Athletic/Activities Handbook, and I understand the possible consequences if my child violates this policy.

Parent’s Name (please print or type): _____

Parent’s Signature: _____

Date Signed: _____