

ACTIVITY STUDENT DRUG TESTING CONSENT FORM

Statement of Purpose and Intent

Participation in school-sponsored extracurricular activities at the Perry School District is a privilege. Activity students carry a responsibility to themselves, their fellow students, their parents, and their school to set the highest possible examples of conduct, which includes avoiding the use or possession of illegal drugs.

Drug use of any kind is incompatible with participation in extracurricular activities on behalf of the Perry Public School District. For the safety, health, and well being of the students of the Perry Public School District, the district has adopted the attached Activity Student Drug Testing Policy and the Activity Student Drug Testing Consent for use by all participating students at the junior high and high school levels.

Participation in Extracurricular Activities

Each activity student shall be provided with a copy of the Activity Student Drug Testing Policy and Activity Student Drug Testing Consent, which shall be read, signed, and dated, by the student, parent or custodial guardian, and coach before such student shall be eligible to practice or participate in any activities. The consent shall be to provide a urine sample: (a) as chosen by the random selection basis; or (b) at any time requested based on reasonable suspicion to be tested for illegal or performance-enhancing drugs. No student shall be allowed to practice or participate in any activity governed by the policy unless the student has returned the properly signed Activity Student Drug Testing Consent. My signature below indicates that I understand and agree with the above statements concerning participation in extracurricular activities.

Student's Last Name _____ First Name _____ Middle Initial _____

I further understand after having read the "Activity Student Drug Testing Policy" and "Activity Student Drug Testing Consent," that, out of care for my safety and health, the Perry Public School District enforces the rules applying to the consumption or possession of illegal and performance-enhancing drugs. As a member of a Perry extracurricular activity, I realize that the personal decision that I make daily in regard to the consumption or possession of illegal or performance-enhancing drugs may affect my health and well-being as well as the possible endangerment of those around me and reflect upon any organization with which I am associated. If I choose to violate school policy regarding the use or possession of illegal or performance-enhancing drugs any time while I am involved in in-season or off-season activities, I understand upon determination of that violation I will be subject to the restrictions on my participation as outlined in this policy.

Signature of Student _____ Date _____

We have read and understand the Perry Public School District "Activity Student Drug Testing Policy" and "Activity Student Drug Testing Consent." We desire that the student named above participate in the extracurricular programs of the Perry Public School District and we hereby voluntarily agree to be subject to its terms. We accept the method of obtaining urine samples, testing and analysis of such specimens, and all other aspects of

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the program. We further agree and consent to the disclosure of the sampling, testing and results as provided in this program. We agree to assume financial responsibility for any follow-up drug testing if a positive result occurs.

Signature of Parent or Custodial Guardian _____ Date _____

Signature of Coach/Sponsor

Activity/Team/Organization

Signature of Coach/Sponsor

Activity/Team/Organization

Signature of Coach/Sponsor

Activity/Team/Organization

Signature of Coach/Sponsor

Activity/Team/Organization