## **Insurance Verification**

A. Statement of risk of participation with parental signature.

WARNING: As a result of participation in co-curricular activities, including interscholastic athletics, in Coshocton City Schools, an injury may occur. Parents (guardians) of athletes, cheerleaders, and the mascot must approve the following.

We the parents (guardians), hereby release the coaches, the High School, the Junior High School, the Administration and the Board of Education of Coshocton City Schools of all responsibility and liability if an injury should occur to our son/daughter while participating in athletic related activities.

- B. Yes, we have adequate insurance to cover our son/daughter in the event an injury should occur.
- C. No, we do not have insurance to cover our son/daughter in the event an injury should occur. Coshocton City Schools will provide information from an independent carrier for "Student Accident Insurance." It is my responsibility to contact the independent carrier.