

Permission Form to Compete in Murray High School Speech and Debate

In order for my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a minor, to take part in and receive advantages of this program planned and sponsored by Murray School District, I am hereby giving permission to him/her to make any or all of the trips included in the planned Speech and Debate tournament schedule.

**Insurance information:**

Company:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy #:

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Allergies/Medications:

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**First Aid:** By signing below, authorization is given for the administration of first aid if and when it is necessary. I also authorize Murray School District and its employees to secure the services of a physician or hospital and to incur the expenses for necessary services in the event of an accident or illness. I will provide payment for all of these costs.

**Recording Students:** In order to track progress, each student will be asked to perform one event in front of a video camera at least twice throughout the year. By signing, you are giving Mrs. Nackos permission to record your student performing in their events.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s Signature Date

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Daytime Telephone Work Telephone Cell

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Other Emergency Contact’s Name and Telephone Number