

# HALLOWES COVE ACADEMY PARENTAL APPROVAL FORM

PARENT OR GUARDIAN PERMISSION

GRADE LEVEL \_\_\_\_\_ BOY/GIRL\_\_\_\_\_

I, \_\_\_\_\_, HEREBY GIVE MY CONSENT FOR  
PARENT/GUARDIAN NAME

\_\_\_\_\_ TO TRY OUT FOR AN INTERSCHOLASTIC  
STUDENT NAME (PRINT)

SPORT: \_\_\_\_\_

LIST SPORT

I UNDERSTAND THAT IF THERE IS A PRE-EXISTING CONDITION, THE SCHOOL/COUNTY COACHES WILL NOT BE HELD LIABLE. I ALSO UNDERSTAND THAT UPON MAKING THE TEAM, MY CHILD IS REQUIRED TO HAVE A PHYSICAL TURNED IN IMMEDIATELY.