

**EXTRACURRICULAR CONSENT FORM**

I have received and have read and understand a copy of the "Seymour Community School Corporation Extracurricular Activities Drug Testing Program", including non-academic disciplinary procedures under the Seymour High School Athletic Department Code of Conduct, the Student Activities Code of Conduct, and for student drivers. I desire that \_\_\_\_\_ participate in this program, and in the extracurricular program of Seymour Community School Corporation, and hereby, voluntarily agree to be subject to its terms for the entire high school career (grades 9 – 12). I accept the method of obtaining urine specimens, testing, and analyses of such specimen, and all other aspects of the program. I agree to cooperate in furnishing urine specimens that may be required from time to time.

I further agree and consent to the disclosure of the sampling, testing, and results provided for this program. This consent is given pursuant to all State and Federal Privacy Statutes, and is a waiver of rights to nondisclosure of such test records and results only to the extent of the disclosures in the program.

Date: \_\_\_\_\_, 19\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Signature

Board Policy 5112 [EXTRACURRICULAR ACTIVITIES AND STUDENT DRIVER RANDOM DRUG TESTING PROGRAM] and administrative guidelines and procedures are available at the Seymour High School office or Administration Building (812-522-3340).

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I, \_\_\_\_\_, have decided not to participate in any extracurricular activities sponsored by Seymour Community School Corporation for the remainder of this school year. In order for me to participate in the extracurricular activity program at a later date, I understand, that I must submit to a urinalysis

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date