

TIMBER CREEK HIGH SCHOOL
ATHLETIC DEPARTMENT
SUMMER/OFF-SEASON PROGRAM/CAMP
INFORMATION FORM

Dear Parent/Guardian:

Your child is choosing to participate in a non OCPS sponsored summer/off-season program/camp for a sport. Since this program does not take place during the time frame specified by the Florida High School Activities Association and/or Orange County Public Schools, your child is not covered by the OCPS student-athletic insurance policy. This High School, the athletic department, neither school administration nor Orange County Public Schools is responsible for any injuries that your child may incur during any summer/off-season program/camp.

I as parent/guardian also understand the preceding policy and that Orange County Public Schools has no accountability for the event. I understand that I must accept responsibility for providing summer/off-season program/camp insurance for my child.

Name of Event:

Print Name of Student Athlete:

Parent/Guardian

Signature _____

Date _____

Return this form to your school athletic director if you are traveling with any school coach or are using any school athletic equipment prior to the listed event.

