



## INSURANCE VERIFICATION FORM

Dear Parents:

The California Education Code, Sections 32220 and 32221, requires that any student of *any* "Educational Institution" who practices for or participates in any inter-school athletic event *MUST* be insured for \$1,500 of insurance covering the medical expenses of accidental injuries. This applies to all sports and to all participants of any age.

This *mandatory* insurance requirement is also extended to students who accompany an athletic team to an extra-mural athletic event and while performing their function as a member of the band, song leaders, yell leaders, etc.

Consequently, students must be excluded from the team and from activities relative to an athletic event unless they have either purchased the school's regularly offered plan, or their parents can assure the District that adequate insurance is in force which meets the requirements of this law.

If you have not purchased the accident plan offered through the school for your child, please fill in the following form and return same to the school principal. Your child will not be allowed to practice or participate until this form has been completed and returned, or you have purchased the insurance plan offered by the school. Enrollment forms will be available on or after August 1st at your child's school.

Terry Bradley, Ed.D.  
District Superintendent

### INSURANCE VERIFICATION AND PARENT PERMISSION

1. This is to verify that my son/daughter \_\_\_\_\_  
*STUDENT'S NAME*  
is covered under \_\_\_\_\_  
*NAME OF INSURANCE COMPANY*  
\_\_\_\_\_  
*EXPIRATION DATE* \_\_\_\_\_ *POLICY NUMBER*  
Benefits indicated in my policy are equal to or broader than those required in the above notice.
2. I give my son/daughter permission to participate in \_\_\_\_\_  
*NAME OF ACTIVITY/IES*  
\_\_\_\_\_  
(Multi-sport athletes must list every sport or fill out a new form prior to each seasonal sport.)
3. I certify that my son/daughter has no medical conditions or disabilities that would cause participation in the above mentioned sport(s) to be dangerous or harmful.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*PARENT/GUARDIAN SIGNATURE*