



MINNESOTA STATE HIGH SCHOOL LEAGUE

Application for Exemption from Physical Examination and Immunization Requirements and Waiver

This confirms the terms and conditions for participation in school sponsored athletic activities of _____, a minor child.

- I hereby certify that I am the Parent/Guardian of the above minor child.
- To the best of my knowledge and belief, the above minor child is and has been in good normal health and is free of all communicable diseases.
- I hereby certify that because of conscientiously held beliefs of the Parent/Guardian of said minor child, Parent/Guardian desires an exemption of minor child from submitting to a pre-participation physical examination required for school sponsored athletics. Not following vaccine recommendations and/or not obtaining a pre-participation physical examination may endanger the health or life of the child or others they come into contact with.
- In consideration for these exemptions, Parent/Guardian agrees to accept complete responsibility for the health of the above minor child. Parent/Guardian further agrees to hold the School District and the Minnesota State High School League harmless in the event of any injury or contracted disease arising out of participation in a school sponsored athletic activity. Parent/Guardian also agrees to indemnify the School District and Minnesota State High School League against any action brought by a third party arising out of the transfer of the communicable disease from minor child to the third party as a result of participation in a school sponsored athletic activity.
- If minor child manifests any condition where there appears to be reasonable grounds for suspecting the presence of a communicable disease, the minor child may be excluded from participation in order to protect them and others.
- If an emergency arises, the Parent/Guardian shall be notified immediately. In the event that the Parent/Guardian cannot be reached, the school authorities may take such temporary measures as they deem necessary.

Parent/Guardian (Print): _____

Parent/Guardian Signature: _____

Address: _____

Telephone: _____

Subscribed and sworn to me this _____ day of _____, 20____.

Signature of Notary