



South Lake High School
A Blue Ribbon Exemplary School
21900 East Nine Mile Road
St. Clair Shores, MI 48080
586-435-1400



GOLF INFORMED CONSENT

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach.

SAFETY RULES to be followed by all participants including but not limited to the following:

1. Travel, to and from off-campus facilities shall be in accordance with the directions of the activity coach.
2. Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly-fitted or defective equipment.
3. Advise the coach if you are ill or have any prolonged symptoms of an illness.
4. Advise the coach if you have been injured.
5. Engage in warm-up activities prior to strenuous participation.
6. Be alert for any physical hazards in the locker room or in or around the participation area. Advise the coach of any hazard.
7. Before swinging a club, make certain that the area around you is clear of others. Be careful after hitting not to throw the club as you can injure someone.
8. Be aware of the dangers of standing in front of or on the side of a person who is attempting to hit the ball, as you may be injured by the ball or by the rebounding of the ball from trees, signs, markers etc..
9. Be aware at all times of other players' positions on the course when you are hitting or when they are hitting. You are vulnerable at all times. Do not hit the ball until proper distance is available between golfing groups.
10. Keep hands and grips dry to minimize the danger of clubs being released.

The above information has been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the golf program.

I am aware that golf is a high-risk sport and that practicing or competing in golf will be a dangerous activity involving **MANY RISKS OF INJURY**. I understand that the dangers and risks of practicing and competing in golf include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of my body, general health and well-being. I understand that the dangers and risks of practicing or competing in may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life.

Because of the dangers of golf, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc., and agree to obey such instructions.



South Lake High School
A Blue Ribbon Exemplary School
 21900 East Nine Mile Road
 St. Clair Shores, MI 48080
586-435-1400



golf Informed Consent page 2

I, _____, am the parent/legal guardian of _____ (student). I have read the above warning and release and understand its terms. I understand that golf is a **HIGH-RISK SPORT** involving many **RISKS OF INJURY**, including but not limited to those risks outlined above.

In consideration of the school district permitting my child/ward to try out for the school golf team and to engage in all activities related to the team including but not limited to trying out, practicing or competing in golf, I hereby assume all the risks normally associated with golf and agree to hold the school district, its employees, agents, representatives, coaches and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of every kind and nature whatsoever which may arise from such risks. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, assignees, and for all members of my family.

 Athlete's Signature

 Date

 Parent's/Guardian's Signature

 Date