



Odyssey School
Sports Physical Exam Waiver

I am aware of the fact that my student needs to have a completed sports physical exam waiver in order to participate in interscholastic athletic activities. I will have this physical exam completed by:

Date: _____

In the meantime, I hereby give authorization for my student to practice and play matches until such time as the sports physical form is on file. I further absolve Odyssey School and members of the coaching staff (both staff and parent volunteers) from harm or blame should a health-related incident occur regarding a health situation of which the staff and Odyssey School are unaware.

Student's Name: _____

Sport: _____

Homeroom: _____

Parent Signature

Date