2023 Thomas County Central Esports Tryout Consent Form

Athletes and Parents: Please read and sign each statement to acknowledge your understanding and consent. DO NOT INITIAL. PLEASE SIGN FIRST AND LAST NAME.

I have read and understand that all esports candidates must attend tryouts and complete all necessary paperwork, including a copy of any medical conditions prior to trying out.

Athlete's Signature _____

Parent Signature _____

I acknowledge that after tryouts, all esports players are expected to be at all esports events unless there is a personal illness or family emergency. I understand that work and vacation absences are unexcused.

Athlete's Signature _____

Parent Signature _____

I acknowledge that it is at the Coaches' discretion to determine which players make the teams and which games and positions they will play. The lineup is subject to change at any time based on performance and the needs of the team.

Athlete's Signature _____

Parent Signature _____

I acknowledge that each esports player will have the opportunity to fund-raise to cover his/her fees. Hardware and software is provided by the district including computers, keyboards, mice, headsets, and game platforms. Players are allowed to use their own peripherals such as keyboards, mice, gamepads, or headsets. The district assumes no liability of damage to personal equipment used for esports. Seasonal fees of \$64 required by the state are to be paid by participants for which students may participate in fundraising activities to offset fees. Additionally, I understand that I am to participate in all team fundraisers in which proceeds go towards the program instead of the player's balance.

Athlete's Signature _____

Parent Signature _____

I acknowledge that esports is a sport that involves extended periods of sitting and using computer equipment. Esports can be a dangerous sport and, without doing anything wrong, accidents can happen. Because of these conditions inherent to the sport, participating in esports exposes the athlete to many risks of injury. Those injuries include but are not limited to death, seizure, carpal tunnel injury, serious injuries to the bones, ligaments, joints, tendons, and general deterioration of health. Such injuries can result in temporary loss of function and serious impairment of future physical, psychological and social abilities, including the ability to earn a living.

Athlete's Signature _____

Parent Signature _____

I understand these risks and will not hold the Thomas County School System responsible in the case of an accident or injury at any time. I acknowledge that, even with the best coaching, the use of the most advanced equipment, and strict observance of rules, injuries are still possible. I acknowledge that it is vital that esports players follow the coach's skill instructions, training rules, and team policies and procedures, to decrease the possibility of injury.

Athlete's Signature _____

Parent Signature

I, ________, am interested in being an esports athlete at Thomas County Central High School. I understand the risks as stated above. If selected, I promise to abide by the rules and regulations as set forth by the coaches, athletic department, and administrators for Thomas County Central High School. I understand that I must fund-raise to help support the program and that I am aware of the amount and due dates of the fee required. I promise to fully cooperate and follow the instructions of all esports coaches. I understand that violations of any of these rules may lead to temporary or permanent suspension from the team.

Athlete's Signature

Date

Parent Statement of Consent

My child, _______, has my permission to participate in the tryout process and to be an esports player at Thomas County Central High School. I understand the risks as stated above. I understand that she must abide by the rules and regulations set forth by the coaches, athletic department, and administration of Thomas County Central High School. My child must be present for all esports activities, practices, and games. I understand that my child will fund-raise to help support the program and that I am aware of the amount and due dates of the fee required. I understand that the violation of any of these rules may lead to temporary or permanent suspension from the team.

Parent or Legal Guardian Signature

Date