CBSE Games 2026 Participation Consent Form

Student Name: _____

Grade: _____

School: A V Public School,Fazilka

Event:CBSE Game

I, [Parent/Guardian Name_____], parent/guardian of the above-named student, hereby grant permission for my child to participate in the following CBSE Games events:

CBSE Cluster Level Games (if selected)

CBSE Zonal Level Games (if selected)

CBSE National Level Games (if selected) I understand that participation in these events may involve physical exertion and the possibility of injuries. I have discussed the risks and benefits of participation with my child and we both agree to participate.

I acknowledge that transportation to and from all events, as well as any associated costs (uniforms, equipment, etc.) are the responsibility of the parent/guardian.

In case of an emergency, I authorize the school coach/official to take necessary action for my child's medical care. My emergency contact information is as follows:

Phone Number:

Signature: [Parent/Guardian Signature]

Date: