2025-2026 MV ATHLETIC INSURANCE WAIVER

Dear Parent/Guardian:

In order for your son/daughter to compete in athletics at Maquoketa Valley for the **2025-2026** school year, your son/daughter must either have insurance or your permission to play without said insurance.

If you have your own family insurance, please read the paragraph below and sign in the space provided. The bottom portion should then be returned to the coach of your child before participation on any athletic team.

The deadline for High School Fall Sports is ***August 11th***.
The deadline for Junior High Fall Sports is ***August 25th***.

Thank you for your attention to this matter.

Scot Moenck
Maquoketa Valley Activities Director/At-Risk Coordinator

My son/daughter _____ has my permission to
(Participant's Name)

participate in school-sponsored activities at Maquoketa Valley Community School District for the 2024-2025 school year. I understand that Maquoketa Valley CSD does not carry insurance to cover injuries sustained by my son/daughter while participating in school activities. Therefore, we understand we must either secure our own insurance or be willing to assume the cost of any injuries sustained by our child.

_____ _____
(Parent/Guardian Signature) *(Student Signature)*