3350F

POPLAR SCHOOLS EXTRACURRICULAR CONSENT FORM

I have received and have read and understand a copy of the Poplar Schools' "Extracurricular Activities Drug-Testing Program". I desire that participate in this program and in the extracurricular program of Poplar's Schools and hereby voluntarily agree to be subject to its terms for the entire high school career (grades 9-12). I accept the method of obtaining urine specimens, testing, and analysis of such specimens and all other aspects of the program. I agree to cooperative in furnishing urine specimens that may be required from time to time.

I further agree and consent to the disclosure of the sampling, testing, and results provided

for this program. This consent is given pursuant to all State and Federal Privacy Statues and is a waiver of rights to nondisclosure of suck test records and results only to the extent of the disclosure in the program. Date:, 20	
Student Signature ************************************	Parent/Guardian Signature
I,	, have decided not to participate in any extracurricular
1 2 1	ools for the remainder of this school year. In order for me to trivity program at a later date, I understand that I must submit
Student Signature	Date
Parent/Guardian Signature	Date