

Waverly City Schools

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Dear Parent or Guardian:

The Waverly City Board of Education unanimously adopted a resolution on August 10, 1983, that all Junior High (7th & 8th) and Senior High (9th-12th) participants be required to have accident medical insurance to cover injury while practicing or competing in an approved athletic contest sponsored by the Ohio High School Athletic Association.

In order for your son or daughter to participate in cheerleading and athletics this school year, it will be necessary for you, the parent or guardian, to sign certifying that you have medical coverage up to \$25,000, and that you will be responsible for any bills that might be incurred due to injury while practicing or competing.

We are enclosing a form to be signed by you certifying this fact. You may want to check your present insurance to see if your son or daughter would be covered if such an injury would occur. If you do not have any insurance, you may purchase the Guarantee Trust Life Policy, administered by N. Carol Insurance Agency, Inc., Columbus, Ohio, through the school, or the coverage may be provided by any other independent carrier.

The Ohio High School Athletic Association has a Liability/Lifetime Catastrophe Medical Plan for athletes participating on athletic teams sponsored by the Ohio High School Athletic Association. Effective the 1994-95 school year, this Catastrophe Plan covers cheerleaders at practices and approved athletic contests. This Catastrophe Medical Plan does not cover cheerleading competitions. The plan pays expenses after the medical costs for the injury that exceeds \$25,000.

Cheryl Francis, Superintendent Roger Ramsey, Assistant Superintendent Claudia Zaler, Chief Financial Officer
J. Edward Dickens, Director of Continuous Improvement Mike Roback, Director of Programs

SCHOOL YEAR _____

Waverly City Schools want you to be aware that minor and serious injuries can occur while practicing and participating in approved athletic contests.

I/we certify that my/our son/daughter _____ has medical accident insurance which covers him/her in case of injury while practicing or participating in interscholastic competition, sponsored by the OHSAA, while a member of an athletic team in Waverly City Schools. I/we understand that I/we will be responsible for any bills that might be incurred up to \$25,000.

Parent/Guardian signature

_____ Cheerleading (7-12) The OHSAA Liability/Lifetime
Catastrophe Medical Plan does not cover Cheerleading Competitions.

_____ Cross Country (7-12)

_____ Football (7-12)

_____ Girls Tennis (9-12)

_____ Golf (9-12)

_____ Soccer (7-12)

_____ Volleyball (7-12)

_____ Boys Basketball (7-12)

_____ Girls Basketball (7-12)

_____ Baseball (9-12)

_____ Softball (9-12)

_____ Tennis (9-12)

_____ Track (7-12)