STUDENTS 3400F

PRIEST RIVER LAMANNA HIGH SCHOOLS EXTRACURRICULAR CONSENT FORM

I have received and have read and understa	and a copy of the Priest River Lamanna High
Schools' "Extracurricular Activities Drug-Testing	Program". I desire that
participate in this	program and in the extracurricular program of
PRLH 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 obtain	ning urine specimens, testing, and analyses of
such specimens and all other aspects of the progra	m. I agree to cooperate in furnishing urine
specimens that may be required from time to time	
I further agree and consent to the disclosur	re of the sampling, testing, and results provided
for this program. This consent is given pursuant t	o all State and Federal Statutes and is a waiver
of rights to nondisclosure of such test records and	results only to the extent of the disclosures in
the program.	
Date:, 20	
Student Signature	Parent/Guardian Signature
*************	**************
I,, have	decided <u>not</u> to participate in any extracurricular
activities sponsored by PRLH Schools for the rem	nainder of this school year. In order for me to
participate in the extracurricular activity program	at a later date, I understand that I must submit
to urinalysis.	
Student Signature	Date
Parent/Guardian Signature	Date