STUDENTS 3400F

HANSEN SCHOOLS EXTRACURRICULAR CONSENT FORM

I have received and have read and understa	and a copy of the Hansen School Districts'				
"Extracurricular Activities Drug-Testing Program". I desire that					
		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 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 o	decided <u>not</u> to participate in any extracurricular				
activities sponsored by School District	ct for the remainder of this school year. In				
order for me to participate in the extracurricular ac	ctivity program at a later date, I understand that				
I must submit to urinalysis.					
Student Signature	Date				
Parent/Guardian Signature	Date				