

Student's Name _____

Student Grade _____

Medical Certification: This certifies that the above named student is physically able to participate in athletics during the coming/current school year.

Exceptions/Medical Conditions:

Physician Name (print)

Physician Signature

Date

(Athletes may not participate until this form, a general sports clearance, or a copy of the physical is uploaded to the [google Athletics Clearance form](https://forms.gle/FTWcPBnuYyhDWWdE9). The form must be completed online. <https://forms.gle/FTWcPBnuYyhDWWdE9>)



Athletic Donation: At Kenilworth Junior High School, we request a donation of \$75 per sport. This donation can be submitted now, or collected upon your student's placement on a team. You may donate online at <https://petaluma.revtrak.net/KJHS-Athletics/#/list>.

Athletic donations are what support our athletic programs. This donation is not intended to prohibit and student from participating in a sport. If there is any reason you are unable to donate, please make an appointment to speak with the Athletic director. All donations collected will be used for officials and equipment for all sports.