

**Dale A. Norton**  
Superintendent

**Kim K. Friel, Ed.D.**  
Assistant Superintendent  
Chief Academic Officer

**Ray Ritchie**  
Chief Operating Officer

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# Nye County School District



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## DEPARTMENT OF ATHLETICS

### HIGH SCHOOL PARENT/LEGAL GUARDIAN CONSENT FORM

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_, hereby agree that any law enforcement agency be authorized to disclose any information concerning matters that may constitute violations of the Nevada Interscholastic Activities Association (NIAA) Drug, Alcohol and Tobacco policy concerning my student-athlete with the Athletic Department at any Nye County School District High School. This contract will remain in effect with you for your entire high school career.

I understand that the information shared with any NCS D School athletic department may lead to disciplinary action of my student-athlete in accordance with the provisions of the NIAA Drug, Alcohol and Tobacco policy. Disclosed information will not be included in the student's cumulative folder of record.

Print Parent/Guardian name: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Student name: \_\_\_\_\_

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

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An Equal Opportunity Employer