

**Drug Testing for Activity Students  
Student Extracurricular Activities Participant Contract**

**Statement of Purpose and Intent**

Participation in school sponsored extracurricular activities at the school district is a privilege and not a right. Such privilege is governed by the Board of Education policy on Drug Testing for Activity Students. The policy and related documents are available for review online at <https://www.normanpublicschools.org/drugtesting>.

Illegal drug use of any kind is incompatible with participation in extracurricular activities on behalf of the school district. Students who participate in activities are respected by the student body and are expected to hold themselves as good examples of conduct, sportsmanship and training. Accordingly, student extracurricular activities participants carry a responsibility to themselves, their fellow students, their parents and their school to set the highest possible examples of conduct, which includes avoiding the use or possession of alcohol or illegal or performance enhancing drugs.

**Participation in Extracurricular Activities**

For the safety, health and well-being of students, the district has adopted the Drug Testing for Activity Students policy and this Student Extracurricular Activities Participant Contract (the "Contract") which shall be read, signed and dated by the student and the parent or custodial guardian before such student shall be eligible to practice or participate in any extracurricular activity. No student shall be allowed to practice or participate in any extracurricular activity unless the student has returned the properly signed Contract.

**Student Signature Section**

I understand after having read the policy and this Contract that, out of care for my safety and health, the district enforces the rules applying to the consumption or possession of alcohol and illegal drugs. As a student extracurricular activities participant, I realize that the personal decision that I make daily in regard to the consumption or possession of alcohol and illegal drugs may affect my health and well-being as well as the possible endangerment of those around me and reflect upon any organization with which I am associated. If I choose to violate the policy regarding the use or possession of alcohol and illegal or performance enhancing drugs any time during the school year, I understand upon determination of that violation I will be subject to the restrictions of my participation as outlined in the policy.

Student Name: \_\_\_\_\_

ID No.: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Parent (and Adult Students) Signature Section**

I/We have read and understand the policy and this Contract. We desire that the student named above participate in the district's extracurricular activities and we hereby agree to abide by all provisions of the school district's policy. I accept and consent to the method of obtaining oral fluid samples, testing and analyses of such specimens, and all other aspects of the program. I agree to cooperate in furnishing oral fluid specimens that may be required from time to time. I further agree and consent to the disclosure of the sampling, testing and results as provided for in this program. This consent is given pursuant to all state and federal privacy statutes and is a waiver of rights to non-disclosure of such test records and results only to the extent of the disclosures authorized in the program.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Adult Student Signature: \_\_\_\_\_

ID No.: \_\_\_\_\_

**FOR OFFICE USE ONLY: *Confirmation of Receipt of Contract***

Coach or Site Activities/Athletics Director: \_\_\_\_\_

Date: \_\_\_\_\_