



Smyth County Public Schools
Testing for Illegal/Unauthorized Drugs and Alcohol Consent Form

Student Pledge/Consent:

I understand and acknowledge that my participation in VHSL-sanctioned athletics and/or receipt of a parking permit is a privilege and in order to participate, I must be a "student in good standing". Therefore, I agree to accept and abide by the standards, rules and regulations set forth by the Smyth County School Board and the coaches for these activities in order to participate. I acknowledge receipt of a copy of the Smyth County Pledge Program Policy and Agreement.

I understand that any use, possession, or distribution of alcohol or illegal or unauthorized drugs is strictly prohibited. I pledge not to use, possess, or distribute these substances under any circumstances. I, through the Pledge Program, authorize Smyth County Public Schools to test my urine for the presence of these substances in my body. I also authorize the release of information concerning the results of such tests to the Medical Review Officer, the Program Coordinator, and my parent(s)/guardian(s).

I understand that I will be subject to random and/or reasonable suspicion testing for illegal/unauthorized drugs and alcohol from the first day of my sport or activity through the last day of competition, or in the case of parking, for the period of time during which I possess a parking permit and park on school property, and I understand that, if necessary, consequences will be administered as specified in the Smyth County Pledge Program Policy Agreement.

(Student Name – Please Print)

(Student Signature)

(Date)

Parent/Guardian Consent:

I have read and understand the above and by my signature below, I hereby agree and give my consent for the above-specified student to be required to abide by and be subject to the terms, conditions, and consequences of the Smyth County Pledge Program Policy and Agreement.

(Parent/Guardian Name – Please Print)

(Parent/Guardian Signature)

(Date)