

OHSAA Pre-Season Meeting Information Acknowledgement

Student Name: _____

Date: _____

I, _____ (parent / guardian) have reviewed and understand the information presented in the CWMS OHSAA Pre-Season Meeting. I am aware of OHSAA and CW Athletic Department polices and by signing to agree to abide by all rules and regulations.

Parent / Guardian Signature

__ / __ / __

date

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