

PARTICIPANT PERMISSION SLIP

(Duplicate as necessary)

Coach:

Each participant MUST complete this form prior to participating in the ICCA Championships. Collect the filled out permissions slips from each athlete. Scan the permission slips in order alphabetically by LAST NAME to match the list of your team roster. Save the scanned document as a pdf file and name it by the team name and division (e.g. JONESHSSMALLVARSITY). Upload the scanned permission slips on the Championship registration form.

My child has my permission to participate in all Championship activities at BOS Convention Center and President Abraham Lincoln Springfield - a DoubleTree by Hilton in Springfield, IL, on January 16 and January 17, 2027. I understand that ICCA is not liable for any injuries my child may receive while participating in this competition. I also permit Wagner Studios and ICCA personnel to photograph my child during the 2027 competition and awards. ICCA reserves the right to use audio, video, and still photography captured during this event for archives and promotional purposes including, not limited to, print, radio, television and internet advertisement.

Child's LAST Name: _____

Child's First Name: _____

School Representing: _____

Parent/Guardian Signature: _____

*** A typed/digital signature will not be accepted. ***

Date: _____