

**Pledge and Consent**  
**Winamac Community High School**

Being a student at Winamac Community High School who may fit into one or more of the following three categories:

1. Students who drive on school property including those enrolled in our driver's training program.
2. Athletes including cheerleaders, managers, mat maids, and mascots.
3. Students at risk of using drugs (parental consent).

At Winamac Community High School, I recognize and accept the fact that my participation is a privilege – an opportunity for me to make significant contribution to my school, my community, and my personal development. Representing Winamac Community High School in athletic activities and driving on school grounds, places many responsibilities upon me as an individual. Many people – including fellow students, faculty members, sponsors, coaches, school officials, and parents – are giving many hours of time and a great deal of financial support to provide a fine interscholastic program for me. In consideration of this, I agree to live by and conduct myself in accordance with the following pledge:

1. I will conduct myself so as to reflect only honor upon myself, my fellow students, my school, my parents, and my community at all times in all places.
2. I will keep myself mentally and physically alert so that I can contribute my best efforts, and benefit my fellow participants, my school, my community, and myself.
3. I will not use tobacco, alcohol, or unlawful illicit drugs while a student of Winamac Community High School.
4. I will actively discourage the use of tobacco, alcohol, and drugs among youth in order to achieve tobacco, alcohol, and drug-free schools.

---

**Drug-Test Program Consent Form**

I have received, read, and understand a copy of "The Winamac Community Schools Student Drug / Alcohol Testing Policy". I have also read and understand the "Pledge" as stated above.

Having this information at my disposal, I, \_\_\_\_\_ will participate in this program and in the athletic and interscholastic programs of Winamac Community Schools and do, hereby, voluntarily agree to subject to its terms. In an effort to promote and preserve the educational value of athletic/student activities and to set an example for others in an effort to promote a student environment free of alcohol and drug use. I accept the method of obtaining oral swab samples, testing, and analysis of such specimen and all other aspects of this program. I also agree to cooperate in furnishing oral swab specimens that may be required for time to time.

I further agree and consent to the disclosure of the sampling, testing, and results provided for in this program. This consent is given pursuant to all state and federal privacy statutes, and is a waiver or rights to non-disclosure of such test records and results to the extent of the disclosure authorized in the program.

\_\_\_\_\_  
Custodial Parent/Guardian  
Signature

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

Note: This form must be returned to the administrative representative, coach, or sponsor of the activity before a student will be permitted to join or participate in a athletic program and/or be allowed to enroll in drive's education.