

**HOME OF THE BLUE BOMBERS**



**PALMERTON AREA  
SCHOOL DISTRICT**

I have read, been educated, and had the opportunity to ask questions about the Palmerton Area School District Resocialization Plan. My signature below indicates that I am aware of the risks associated with COVID-19 while agreeing to abide by the terms and conditions set forth in the PASD Resocialization Plan. This document must be completed and signed prior to any in-person meeting with your respective team. The Resocialization Plan can be found on the PASD website under Athletics or by using this link: <https://bit.ly/3eEBJu>

**Student Name (Print)** \_\_\_\_\_

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

**Date** \_\_\_\_\_

**Sport** \_\_\_\_\_

**Parent/Guardian Name (Print)** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**PLEASE RETURN THIS COMPLETED FORM TO YOUR HEAD COACH**