North Hunterdon-Voorhees Regional High School District Random Drug Testing Program Consent Form

FOR STUDENT ACTIVITIES & SENIOR PARKING ONLY

I understand fully that my performance as a participant and the reputation of my school are dependent, in part, on my conduct as an individual. I hereby agree to accept and abide by the standards, rules and regulations set forth by the North Hunterdon-Voorhees Regional High School District Board of Education and the sponsors for the activity in which I participate.

I authorize the North Hunterdon-Voorhees Regional High School District to conduct a test on saliva, urine and/or breath which I provide on-site to test for alcohol and/or drug use if my name is drawn from the random pool. Pursuant to the Regulations for Policy #5531, I also authorize the release of information concerning the results of such tests to the Superintendent or administrative designee.

I understand that I may also be randomly drug tested throughout the remainder of the school

year.			
(Student Name – Please Print)	(Stud	(Student ID Number)	
(Student Signature)	(Date)		
(Parent/Guardian Signature)	(Parent/Guardian Name – Print) (Date)		
(Parent/Guardian Home Phone)	(Parent/Guardian Work Phone)	(Parent/Guardian Cell Phone)	
☐ I plan to participate in the of Extra-curricular Action On-campus Parking	tivity		
☐ I am volunteering to be place	ced in the testing pool.		

THIS FORM IS NOT REQUIRED IF YOU HAVE ALREADY SIGNED THE ATHLETIC APPROVAL FORM

NORTH HUNTERDON-VOORHEES REGIONAL HIGH SCHOOL DISTRICT

ACTIVITY/ATHLETIC PROGRAM/PARKING PERMIT DROP FORM

I,	wish to withdraw from _	
If withdrawing from parking, plea	ase insert decal number here:	
	the date this is received by the to all extra-curricular activitions parking permit. I undersurricular activities not required not receive recognition as a manufacture of the state of the	tand, by withdrawing, I can no I for graduation, athletic program nember of these activities or
(Student Signature)	(Print Name)	(Date)
(Parent/Guardian Signature)	(Print Name)	(Date)
(Advisor Signature)	(Print Name)	(Date)
(Assistant Principal Signature)	(Print Name)	(Date)