



**WYOMING HIGH SCHOOL ACTIVITIES ASSOCIATION
731 EAST 2ND STREET
CASPER, WY 82601-2620**

**PETITION FOR WAIVER OF WHSAA RULE 5.0.8 (MIXED GENDER TEAMS)
TO THE WYOMING HIGH SCHOOL ACTIVITIES ASSOCIATION**

This form is to be used when submitting information to the WHSAA for waiver of WHSAA Rule 5.0.8 (Mixed Gender Teams) under the provisions of the rule as published in the Association Handbook. Please follow the instructions on form when preparing.

WAIVER REQUIREMENTS

Under certain conditions as defined below the commissioner may waive the Mixed Gender Team Rule to allow participation for the applicant. Be sure that all required information is written either in the space provided or separately attached.

REQUIREMENTS

Requirements to satisfy the conditions to be considered for waiver.

1. Student must meet all other WHSAA and school rules and regulations.
2. Petition must be for waiver of an athletic activity that is not offered separately for boys and girls.
3. Petition must be for a student of the gender that has been judged to have had a history of past discrimination in athletic activity.
4. Student must have a history of interest in the athletic activity in question.
5. Student and parent must agree to all terms and conditions of this petition and indicate so by signing on each appropriate signature line.

SHOULD THE COMMISSIONER'S DECISION BE APPEALED, ACTION WILL THEN BE TAKEN BY THE WHSAA BOARD OF DIRECTORS AT THEIR FIRST MEETING FOLLOWING WRITTEN NOTICE OF APPEAL.

_____ High School at _____

petitions for _____ on _____
(Student's Name) (Year in School) (Date)

for waiver of WHSAA Rule 5.0.8 for the following athletic activity _____

Date of Birth _____

(Signature of Principal)

(Date)

STATE FULL DETAILS

It is the responsibility of the petitioning school to supply all information as required. Be sure that this information written either in the space provided, or on a separate sheet of paper attached hereto. Please supply a history of student's activity participation including their interest in the athletic activity for which this petition is completed.



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Date _____ Signed _____
(Person completing this section of Form)

PARENT/GUARDIAN INFORMED CONSENT

I, the parent or guardian of _____, realize that there is the risk of my son/daughter being injured that is inherent in all activities participation. I realize that the injury may be severe including the possibility of fractures, brain injury, paralysis or even death.

I hereby give consent for my son/daughter to participate in _____ offered by _____ and will abide by all policies governing these programs.
(School)

(Date) (Signature of Parent/Guardian)

ASSUMPTION OF RISK

Participation in all activities requires the acceptance of risk of possible serious injury. The risk can be minimized by following your coaches' rules and procedures, by familiarizing yourself with the rules of the activity, and by following the specific rules issued by manufacturers for the safe use of your activity equipment. The risk is always there, but you can help minimize making safety a shared responsibility. When you make the decision to participate in an activity, you are assuming the shared responsibility of following the activity's rules, the coaches' rules, and the equipment manufacturer's rules. You, as a participant, help make the activity safer by not intentionally using techniques which are illegal and which can cause serious injury. Further, you understand by placing _____ in the situation of this waiver you possibly increase these inherent risks through broadening the spectrum of possible uneven matching of students according to strength, quickness, and ability.

Your signature below indicates that you have been informed about the importance of following rules in activities participation; and you realize that there is a risk of being injured that is inherent in all activities. You realize that the risk of injury may be severe, including the risk of fractures, brain injuries, paralysis or even death.

(Date) (Signature of Parent/Guardian)

(Signature of Student)

WHSAA Commissioner's Decision Approved _____ Denied _____

(WHSAA Commissioner's Signature Date)