



HILLSBOROUGH HIGH SCHOOL

466 RAIDER BOULEVARD, HILLSBOROUGH, NJ 08844-1499

Athletic Department

(908) 431-6612

Fax: (908) 874-6353



Personal Athletic Equipment Helmet Waiver

As part of the regular operations of the Hillsborough High School Athletic Department, the program issues and maintains the equipment necessary for the student-athletes to participate safely in accordance with the specifications established by the National Federation of High Schools and New Jersey Interscholastic Athletic Association.

A parent may choose to purchase a helmet for his/her student-athlete under the following conditions:

- The helmet meets NOCSAE standards.
- The helmet must be equal to or better than the helmets purchased by the athletic department.
- The helmet must be **etched** with student-athletes name inside to ensure re-issuance to proper student-athlete.
- Upon purchase, the helmet must be turned over to the athletic department to be sent out for painting to match existing helmets.
- At the end of the season, the helmet stays with the athletic department to be sent out for professional reconditioning in accordance with NOCSAE standards.
- The helmet will be re-issued to the student-athlete at the NJSIAA specified open period for the following season.
- At the completion of the student-athlete's sports career, the helmet will be turned over to the student-athlete.
- Approval from the Hillsborough High School Head Coach, Athletic Trainer, and Athletic Director.

Make of helmet: _____

Model of helmet: _____

By signing this waiver and release, I agree and understand that injury is a part of collision sports. I am aware that no equipment will prevent my student-athlete from sustaining a concussion or any traumatic brain injury. I agree to the regulations stipulated above and waive my right to assert any claims against the Hillsborough Township Public School District that might arise out of the use of the student-owned helmet while participating in the athletic programs. I also agree to indemnify and hold Hillsborough Township Public School District harmless against any claims by third parties that might arise out of the student-owned helmet while participating in the athletic programs

Student/Athlete Print Name: _____

Student/Athlete Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Coach Signature: _____ Date: _____