

**McKinney Independent School District
Drug/Alcohol Screening Test
Parent/Guardian/Student Consent Form**

I, _____ and _____
(print name of student) (print name of parent/guardian)
am the parent/guardian of _____ a student enrolled in the
(print name of student)
the McKinney Independent School District.

I understand that participation in an extracurricular activity is a privilege that may be withdrawn for violations of McKinney ISD Board Policies. I understand that extracurricular activities include, but are not limited to: all UIL activities; school-sponsored student groups/clubs/organizations; student council; all elected/appointed student officers; and non-curriculum-related student groups.

I acknowledge that I have received a copy of the Random Drug/Alcohol Testing Program for McKinney ISD. I have read the District's Policy and understand the provisions of the random drug/alcohol testing program. I hereby consent to the testing provided by the program. I understand that participation in extracurricular activities at McKinney ISD, as defined under the Policy, is conditioned upon my consent and participation in the random drug/alcohol testing program. In consideration of the benefits arising to me/my child from this activity, I hereby grant permission for me/my child to participate in the program. I further agree to and shall indemnify and hold harmless the District, its officers, agents and employees, from suits and liability of every kind, including expenses of litigation, court costs, and attorneys' fees for injury or damage which I or my child, or any other person might sustain as a result of my child's participation in the random drug/alcohol testing program.

I acknowledge that I have read and understand this consent and release. I represent that I am the student/parent or guardian of the student named above, and I hereby agree that we shall both be bound by the terms of the consent and release provisions set forth in the random drug/alcohol testing policy.

Circle which (Parent/Guardian Signature) _____ (Date) _____

I, the student noted above, acknowledge that I have read the foregoing consent and release and that I understand it and agree to be bound by its terms and the terms of the random drug/alcohol testing program.

(Student Signature) _____ (Date) _____

(Notary Signature & Seal or School Official) _____ (Date) _____