

Berne-Knox-Westerlo Central School District

1738 HELDERBERG TRAIL · BERNE, NEW YORK 12023

Dr. Timothy Mundell, Superintendent (518) 872-1293 http://www.bkwschools.org

District Office · (518) 872-0909 · Fax: (518) 872-0341 High School Office · (518) 872-1482 · Fax: (518) 872-2083 Middle School Office · (518) 872-0950 · Fax: (518) 872-2083 Elementary Office · (518) 872-2030 · Fax: (518) 872-2031 Special Education Office · (518) 872-0945 · Fax: (518) 872-5128

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HIGH RISK SPORTS MEDICAL AUTHORIZATION

PLEASE SIGN AND FORWARD TO YOUR INDIVIDUAL HEALTH PROVIDER. MUST BE ON FILE TO BEGIN HIGH RISK ATHLETICS.

Dear Medical Provider,

As a result, I am requesting permission for my

As you know, Governor Cuomo has stated that "high risk" sports may begin play as of February 1, 2021, pending the approval of local Department of Health guidelines. The Albany County Health Department has stated that our athletes need permission from their own medical providers in order to join their team and compete.

son/daughter	to participate in the
son/daughterinterscholastic sport of	at Berne-Knox-Westerlo CSD
during the 2021 season. The guidelines do not reperson; although that is certainly your prerogative	equire that you physically see them in
I request that you sign below indicating your correquesting that you fax or email the permission f	
Thomas Galvin, Director of Athletics	
Tom.Galvin@bkwschools.org	
518-872-1482	
Fax: (518) 872-2083	
If you have any questions please contact Tom or (Alicia.Lounsbury@BKWschools.org, 518-872-	
Parent/Guardian Signature:	
Medical Provider Name:	
Medical Provider Signature:	
Phone:	
Date:	