

**MIDWAY COLLEGE
ATHLETIC DEPARTMENT STUDENT-ATHLETE
DRUG & ALCOHOL TESTING CONSENT**

By signing below I hereby:

- Acknowledge that I have received a copy of the Midway College Drug & Alcohol Policy.
- Attest that I have reviewed it carefully and agree to comply with this testing policy.
- Understand that it is a privilege--not a right--to participate in intercollegiate athletics at Midway College and that I have a choice to refuse to sign this consent form.
- Understand that any refusal of my consent to these drug testing policies and procedures will result in immediate dismissal from all Intercollegiate Athletics while attending Midway College, and that I will also give up all athletic aid monies and privileges, and that I may affect any additional financial aid by refusing to consent.

Student-Athlete printed name

Sport(s)

Student-Athlete Signature

Date

Parent Signature (if student is under 18)

Date