

reported by the media or related to a student-athlete reinstatement case, infractions case or waiver request. You also agree that necessary case information (i.e., information from your student-athlete reinstatement case, infractions case or waiver request) may be published or distributed to third parties as required by FCSAA/NJCAA bylaws, policies or procedures. You will not be identified by name by the FCSAA/NJCAA in any such published or distributed information.

4. The undersigned hereby agrees to the release of statistics resulting from athletic competition as required by the FCSAA/NJCAA Office of Statistical Service (FCSAA Service Bureau).
5. I have not and will not violate any of the rules of the National Junior College Athletic Association (NJCAA), Florida College System Activities Association (FCSAA), and/or College of Central Florida. I understand that violation of any of the rules of the NJCAA, FCSAA and CF may result in my removal from the team and/or termination of an athletic scholarship.

Athlete: _____ **Date:** _____
Signature MM/DD/YY

The signature of the student's parent or guardian is required if the student is under 18 years of age or if the student is at least 18 years of age and is a dependent as defined by Section 152 of the Internal Revenue Code of 1954.

Parent/Guardian: _____ **Date:** _____
Signature MM/DD/YY