



Monticello Athletics

1400 Independence Way • Charlottesville, Virginia 22902

PHONE: (434) 244-3130 • FAX: (434) 244-3118

Dear Football and/or Boy's Lacrosse Parents/Guardians,

In order for Monticello High School to permit your student-athlete to utilize an independently purchased adult helmet, the following steps must take place:

1. Only new and unused helmets purchased directly from the manufacturer or manufacturer authorized dealer will be permitted, or must have been recertified in the last 12 months (documentation required).
2. Each helmet must have the NOCSAE safety standards stamp and match the colors on the helmets purchased and issued by Monticello High School.
3. Parent/Guardian must bring the helmet(s) along with the purchase receipt and waiver to the Athletic Director for verification and donation to school inventory. ***Equipment can NOT be used in practices or games until officially donated and accepted by the Monticello High School Athletic Director.**
4. Each donated helmet becomes the property of Monticello High School and remains within Monticello Athletics inventory until the conclusion of your student-athlete's playing career. At that time, you can elect to allow the helmet to stay with Monticello High School for future student use at which time the helmet becomes the permanent property of Monticello High School, or you may elect to have the helmet returned to you. This decision shall be made at the end of your student's senior football/lacrosse season.
5. Each donated helmet will be earmarked specifically for your student-athlete so long as the equipment meets current safety standards and properly fits. The helmet will be sanitized and reconditioned at the end of each season before being reissued to your student-athlete.

Acknowledgement of Helmet Donation and Waiver of Liability

As the Parent/Guardian of the student-athlete named below, I hereby agree to comply with the requirements set forth above and donate the independently purchased helmet to Monticello High School. I further agree to release Monticello High School from any and all liability for any accidents, injuries or death to my child cause by or resulting from my child's use of the donated helmet. I am entering into this Agreement freely and voluntarily, and I understand and acknowledge that the terms contained herein are and shall be binding on me, my heirs, assigns and legal representatives.

Athlete Name _____ Grade _____

Helmet Brand _____ Model _____ NOCSAE Stamp: Yes ___ No ___

Certification Date _____ Purchase Date _____ Sport: Football ___ Lacrosse ___

Parent Signature _____ Date _____

Athletic Director Signature _____ Date _____