



# Riverside Academy

Rebel Pride, Respect, Rigor

***Administrative Staff***

Michael K. Coburn  
*Principal*

Cheree Gomez  
*Assistant Principal*

Sonya Mazzella  
*Assistant Principal*

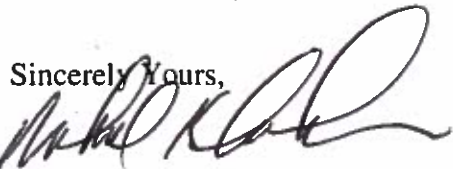
Frank Cazeaux  
*Disciplinarian*

Timmy Byrd  
*Athletic Director*

To: Parents of Students Participating in Interschool Athletics

<b>FOOTBALL</b>	<b>BASEBALL</b>	<b>BASKETBALL</b>
<b>TRACK</b>	<b>VOLLEYBALL</b>	<b>SOFTBALL</b>
<b>SOCCER</b>	<b>SWIMMING</b>	<b>GOLF</b>
<b>CROSS-COUNTRY</b>		<b>CHEERLEADING</b>

Riverside Academy is requiring that all students who will participate in the above named sports be adequately insured against injury. Parents who have adequate insurance protection and do not desire that their child participate in the school insurance plan must complete the following certificate.

Sincerely Yours,  


Michael Coburn, Principal

I, the parent, \_\_\_\_\_, do hereby relieve the Riverside Academy board, principal, and coaches of Riverside Academy of any expenses in connection with injuries sustained by my child, \_\_\_\_\_, while participating in practice or game sponsored and supervised by personnel of Riverside Academy. I have adequate coverage that will take care of all doctor bills and hospital costs.



\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Date**