

Sport: _____

**Labette Community College Athletic Association
Urine, Oral Fluid and Screen Analysis
Informed Consent and Release from Liability**

In accordance with the applicable provisions of the Privacy Act of 1974.

I, _____ (print full name and sport) agree to submit a sample of my urine and/or oral fluid for screening and analysis. I understand that this screen and analysis will be conducted by qualified laboratory personnel at an approved laboratory selected by the Athletic Director and team physician.

The purpose of this screen and analysis is to determine or rule out the presence of non-prescribed or prohibited, dangerous controlled substance in my urine and/or oral fluid.

Due to the provision outlined, I consent to this request for a urine and/or oral fluid specimen. I hereby and herewith release the Labette Community College Athletic Department, Labette Community College, the approved laboratory, and all employees and agents of these institutions from any liability whatsoever arising from the request to furnish this urine and/or oral sample, the testing of the urine and/or oral sample and decisions made based on the results of the analysis.

I have read the Labette Community College Drug Policy and understand its purpose, populations, methodology, drugs of consideration, drug screening conditions, and actions or sanctions. I understand a documented chain of specimen custody exists to ensure the identity and integrity of my sample throughout the collection and testing process. I further understand that my results will remain in exclusive confidential possession of the Labette Community College Athletic Department.

Additional Conditions of Participation and Financial Aid Agreement

I understand Labette Community College has a drug screening policy for the purpose of education, prevention, detection and deterrence of substance usage and abuse. In accepting this privilege to participate, I agree to drug screening and testing and understand that non-compliance with the policy will be a breach of this privilege to participate agreement, which may result in my removal from the team and loss of my athletic related financial aid.

Student Athlete

Witness

Date

Witness