

St. Louis Academy
Athletic Participation Consent and Release

(Please print or type)

_____ Date: _____
(Last) (First) (Middle)

Address: _____ Zip: _____

Phone: _____ Grade: _____ DOB: _____ Age: _____

Sex: Female _____ Male _____
(Name of parent/guardian with whom child resides)

Name of School _____

Part I: Student Consent: [To be read and discussed by student and parent(s), and signed by student]

I have read and understand the Player & Parent Code of Conduct Agreement for St. Louis Academy. (SLA) I do not know of any reason, including but not limited to, any medical condition that I would not be eligible to represent St. Louis Academy (SLA) in athletics. If I am accepted as a representative (on a team), I agree to follow the rules and regulations of St. Louis Academy and to abide by their respective decisions concerning these rules and regulations. I know, appreciate and have discussed with my parent(s)/guardian(s) the risks and dangers involved in athletics generally, and in the particular sport to which I participate listed below. I know and have discussed with my parent(s)/guardian(s) that unexpected dangers may arise during my participation in SLA athletics and that I and my parent(s)/guardian(s) assume all risks of injury to my person and property that may be sustained by me or by my parent(s)/guardian(s) in connection with or in any way related to my participation in SLA athletics.

Student Signature: _____ Date: _____

Part II: Parent Consent & Release: [To be completed and signed by (custodial) parent(s)/guardian(s)]

A. In accordance with the rules of St. Louis Academy (SLA), I request that my child (hereinafter referred to a "participant") be permitted to participate in any of the following SLA sports: Cheerleading, Football, Basketball, Volleyball, Soccer, Track and/or Softball.

I further hereby give consent to the participant's participation in any of these sports.

B. I understand that participation will likely necessitate travel, and I give my consent to have such transportation provided by St. Louis Academy (SLA) and/or volunteers (such as parents and coaches).

C. I acknowledge that I and the participant have read and understand the Player & Parent Code of Conduct Agreement for St. Louis Academy (SLA). I do not know of any reason, including but not limited to, medical reasons that the participant could not be eligible to represent St. Louis Academy (SLA) in athletics.

D. I acknowledge that I and the participant know and appreciate and have discussed the risks and dangers involved in the above described sports. We are assuming all risks of injury and damage in any way related to the participant's participation in the sport. I hereby release, discharge, and relinquish St. Louis Academy (SLA), Besancon Parish, and the Diocese of Fort Wayne-South Bend and all their representatives, agents, officers, employees, coaches, volunteers and officials from all claims, demands, actions, and causes of action of any sort for any injuries sustained by the participant and me, and from any damages to the participant or my/our property.

E. I acknowledge that the participant has adequate family insurance coverage through: _____ Insurance Company.

I HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AND RELEASE FORM AND THE STUDENT ATHLETE RESPONSIBILITY AND ELIGIBILITY RULES OF ST. LOUIS ACADEMY.

Parent(s)/Guardian(s) Signature(s): _____ Date: _____