

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Academic Year \_\_\_\_\_

### Athletic Permission Form SCS Code of Athletics

- The use or possession of non-prescription drugs, anabolic steroids, alcohol or tobacco is strictly prohibited.
- The attendance at scheduled practices and games is required.
- An unexcused absence during the school day or arrival after 1<sup>st</sup> hour (with the exception of a medical appointment) eliminates any after school participation that day.
- Good sportsmanship in winning or losing before, during, and after a contest is expected. The use of vulgar or profane language is prohibited.
- Athletes are expected to take school transportation to and from away games. Any exceptions must have parental permission.
- Team and school awards will be given to athletes who complete the season and meet the requirements set in the Athletic Handbook.
- By MHSAA regulation: (This is not a complete listing of MHSAA regulations.)
  1. Transfer students must meet transfer eligibility requirements before competing.
  2. Athletes must not accept money or merchandise for participating in any athletic event. Any award received must value less than \$15.00.
  3. Athletes may not participate in any athletic competition that is not sponsored by SCS in the same sport during the same season. Athletes must not compete in an "All-Star" or fund-raising event.
- Violation of the "SCS Code of Athletics" or MHSAA regulations may result in practice or game suspensions, forfeiture, team expulsion, and/or loss of awards.

#### Statement of Assumed Risk

There are many benefits to participation in athletics, however, there are also risks. Although Southfield Christian has attempted to provide safe facilities, good equipment, and qualified coaches, there is always a chance, despite these precautions, that an injury can occur. By allowing your child to participate in athletics, you are acknowledging the fact that you are putting him/her into a potentially injurious situation.

#### State of Insurance

In the event of an injury during any aspect of a student's participation in the athletic program, **IT IS THE RESPONSIBILITY OF THE PARENT'S INSURANCE COMPANY TO PAY FOR MEDICAL EXPENSES.** Should a parent not carry medical insurance, it is then his/her responsibility to pay for any medical expenses. Southfield Christian (with MHSAA) provides catastrophic insurance for medical expenses that exceed \$25,000 resulting from a school-related athletic injury.

#### Permission to Participate

I hereby state that I have read the above statements and under these conditions grant permission for my child to participate in athletics at SCS. I agree to hold Southfield Christian School, its employees and volunteers, harmless for any claim or action that might arise on behalf of myself or my son/daughter other than for the willful, wanton, or reckless misconduct of SCS, its employees or volunteers. I also give my permission for the school to transport my child and for the coach to admit my child to a medical facility if, in his/her opinion, an emergency exists.

- Are there any sports in which your child should not participate? \_\_\_\_\_
- Does your child have any pre-existing medical conditions which may affect athletic participation? Yes \_\_\_\_ No \_\_\_\_  
If YES, PLEASE EXPLAIN ON AN ATTACHED SHEET

#### Emergency Information

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Insurance Policy Number and Carrier: \_\_\_\_\_

Family Doctor's Name and Number: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*This permission form is valid for all sports during the current academic year unless noted above.

\*\*Please note that hospitals may refuse admittance of your child if this form is not notarized or if they cannot reach you by phone.