



HOLY NAME SCHOOL ATHLETIC ASSOCIATION

215 West Horner Street
Ebensburg, PA 15931
(814) 472-8817

PARTICIPANT REQUEST FORM 2017-2018SPORTS—Holy Name School

If you would like your child to participate in the sports program at Holy Name School, please complete, sign and return the following statement of consent and release of liability. As a parent or legal guardian, you remain fully responsible for any legal responsibility which may result from any personal actions taken by the named student.

I/we, the parent or legal guardian of _____ **(print student's name)** warrant that I/we request that said child participate in the sports program(s) at Holy Name School. I/we hereby release Holy Name Parish, Holy Name School Athletic Association, Holy Name School, the officers, directors and trustees of said organization, any manager, coach, instructor, umpire and referees in any such sports program(s) from any civil damages arising from any acts or omissions in conducting or sponsoring the sports program.

I/we understand it is the responsibility of the parent(s), legal guardian(s) to have a child physically reexamined if any condition(s) are present at the time of the initial physical which may be harmful to the child or any other reason(s) or condition(s) which may occur during the school year and especially during the time of participation in a said sport.

I/we understand it is the responsibility of the parent or guardian to provide and maintain adequate medical insurance for the named student. Any medical expenses that arise from a sports related injury will be the full responsibility of the parent/guardian.

I/we understand it is the responsibility of the parent or guardian to provide transportation to and from all practices and games.

I/we understand it is the responsibility of the child and parent to care for the uniform which is given to a team member from the Athletic Association. Any damage or misuse of the uniform will result in parent(s) or legal guardian(s) paying replacement cost. Uniforms are to be worn at school-sponsored games only.

I/we have read and agree to be governed by the following documents: *Parent and Student Handbook.*

I/we have read the above rules and regulations and request that my child be permitted to participate in the sports program(s) at Holy Name School as indicated below:

PLEASE CHECK ALL SPORTS THAT APPLY FOR THE SCHOOL YEAR

Holy Name School Basketball Program Holy Name School Soccer Program

PLEASE COMPLETE THE FOLLOWING

Child's Name: _____

Grade: _____

Parent/Guardian Name: _____

Phone Number: _____ Texting OK? Yes No

T-Shirt Size (circle one): YOUTH Small Medium Large
ADULT Small Medium Large Extra Large

Student Signature _____ **Date** _____

Parent Signature _____ **Date** _____