

HCA Student/Parent Athletic Participation Contract and Parent Permission Form

Student: _____

Grade/Age: _____ School Year: _____ Sport/Team: _____

Parent and Student Athlete: Please review the participation information and this contract carefully, complete information as requested, sign and return the completed contract/permission form to the school.

Stipulations

The Student-Athlete and his or her parent/guardian have received and read the Student-Parent Athletic Participation Information. Based on this information, the student and parent/guardian understand and stipulate the following:

1. I/We affirm that the student will exert effort to maintain a high level of academic achievement.
2. I/We understand there is potential for serious, catastrophic, or life-threatening injury associated with participation in a sport and that participation in practice or event will not be allowed until a medical evaluation (sports physical) has been turned into the school.
3. I/We affirm that the student will not participate in hazing at any time, of any nature.
4. I/We, as a participant or spectator, will exhibit a high level of sportsmanship at contests.
5. I/We will follow appropriate procedures in communicating concerns to coaches.
6. I/We affirm that the student will abide by all team and participation standards.
7. I/We understand that a \$30 participation fee per person if enrolled in HCA or \$55 per non-enrolled student will be due by the first practice in order to participate (unless amount is otherwise specified or child is under the age of 8).

I, _____, and I, _____ have
parent's name printed student's name printed

carefully reviewed the Student-Parent Athletic Participation Information and the Student-Parent Athletic Participation Contract and Parent Permission Form. I/We understand the conditions for participation in the Hamilton Christian Academy interscholastic athletic program, and we understand that there are inherent risks associated with participation.

I/We agree as follows:

- My son/daughter has my/our permission to participate in athletics at Hamilton Christian Academy.
- I/We understand and conform to all of the statements in the Stipulations portion of the Contract.

Please sign below and return to the coach at Hamilton Christian Academy.

Signature of Parent/Guardian

Date

Signature of Student

Date