

Holy Trinity School Athletics Consent & Interest Form 2008-2009

Students Name _____ Phone # _____

Date of Birth _____ Grade in Fall/2008 _____

1. I hereby give permission for my child to engage in sports at Holy Trinity School.
2. I am familiar with the common hazards of sports and fully understand the dangers associated with them. I hereby release and discharge Holy Trinity School, the GRACEAC League, it's agents, employees and officers from all liability whatsoever for the personal injuries or damage to property arising out of the sports activities on the premises of the school, or at any other location where games or practices are conducted, or in transportation to or from contests at other locations.
3. I understand it is my responsibility to provide **MEDICAL INSURANCE COVERAGE** for my child in case of accidental injury. Holy Trinity School or any of it agents or coaches will NOT be responsible for medical bills incurred due to injury to my child. My Child is currently covered by the following medical plan:
 - a. **Name of Insurance Company/Plan** _____
 - b. **Policy/Contract Number** _____
4. I understand it is my responsibility to obtain a sports physical exam for my child *Prior to the Upcoming School Year*, and must supply a copy of this exam to the school office. Students without a physical examination on file are ineligible to participate in any Holy Trinity Athletic function including camps, practices and games.
5. I understand that as a parent of an athlete, it is my obligation to support the Holy Trinity Athletic Program and Athletic Boosters by participating in fundraisers, game managing games hosted by our facility, and working 6 hours annually in the concessions.
6. I agree to hold my child and myself accountable to the policies and rules of the Holy Trinity Athletic Program.

PROGRAM OFFERRINGS FOR 2008-2009

Parents and Students should give careful consideration to the choices made below. Please keep in mind that involvement in other activities such as music, dance, AAU basketball etc, which could prohibit the student from full participation in a Holy Trinity sport. The number of participants for any given sport is used to determine:

- If enough participants exist to form a team
- If a merge or split is necessary
- How many coaches are required
- Budgeting for league fees, additional equipment and uniforms if necessary.

Please understand that while every effort will be made to create a Holy Trinity team for each sport at each level, there may not be a team if there is a shortage of participants or coaches. If enough players aren't available, students may be given the option to merge with another school.

Please Circle ONE Activity Per Season

<u>Fall 2008</u>	Girls Volleyball	Boys Soccer	Boys Football	
<u>Winter 2008</u>	Boys Basketball	Girls Basketball	Cheerleading/Pom-Pom	Competitive Cheer
<u>Spring 2009:</u>	Boys Baseball	Girls Softball	Girls Soccer	Co-Ed Track*

*You may participate in Co-Ed track while participating in a second spring sport

I am interested in **coaching** one of the sports listed above. Please send me an application

Signature of Parent: _____ Date: _____

Signature of Student: _____ Date: _____