

PEOPLES ACADEMY ATHLETICS
Student/Parent Contract and Permission Form

Student's Name: _____ Grade: _____

Age: _____ D.O.B. ____/____/____ Home Phone # _____

Cell Phone # _____ Email _____

Current Sport _____ Coach _____

Parent(s)/guardian(s) name(s) _____, _____,

Parent(s) cell phone # _____, _____

Parent(s) work phone# _____, _____

Parent(s) email _____, _____

Students, parents or legal guardians,

Please read the following agreement and indicate your support by signing this document. Students should understand that their signature is an indication of their commitment to follow all appropriate athletic and school handbook rules. These rules mean that you agree to stay drug, alcohol, and tobacco free during your sports season as well as abide by accepted citizenship and sportsmanship codes and behaviors. Students understand that they will be subject to temporary or permanent suspension from the team if in violation of any of the following codes:

GENERAL TRAINING RULES

1. The use or possession of tobacco, alcohol or unprescribed, illegal drugs is prohibited among our athletes during the season of participation. The season begins at the conclusion of the organizational meeting for that sports season. See handbook for guidelines and consequences.
2. Students will attend all scheduled practice sessions.
3. Students will commit to the ideals of fair play and sportsmanship toward all team members, coaches, opponents and game officials.
4. Students will behave in a fashion that in no way will tarnish the reputation of Peoples Academy while on a bus trip to another school, in a practice, game or any team situation.
5. Students will not haze or harass any student.
6. Students will attend classes and conduct themselves in a respectful manner toward fellow students, teachers and all school personnel.
7. Students will not display any inappropriate language/actions. In addition, profanity and or derogatory remarks of an ethnic, racial, sexual orientation, or gender related nature are not acceptable.
8. Students will assume responsibility for the care and prompt return of all equipment/uniforms issued to them. Students must understand that athletic uniforms are the property of P.A. and are on loan to them. If students fail to return their uniforms, they will pay for its replacement and understand that additional consequences may be imposed.

PARENT/GUARDIAN PERMISSION (this section is to be filled out by the parent/guardian)

My student has permission to participate in the following activity: _____

My student is covered by a student accident insurance or family health policy.

Company Name _____ Policy Number _____

Date of Last physical exam _____ Dr. Name _____
(required every 2 years)

I have read the above agreement and the PA Co-curricular Handbook and accept the conditions as listed.

Student Signature

Parent/Guardian Signature

EMERGENCY INFORMATION

In the event of serious accident, injury, or illness concerning my child, I understand that the school will try to contact me using the phone numbers listed on this form. If the school cannot reach me, I hereby authorize emergency personnel to render whatever services necessary for the health, security, and comfort of my child while under the supervision of the Peoples Academy coaching staff. Approved only in the event that all honest efforts to contact me have failed (if the student/athlete is under 18)

Parent/Guardian _____ Date ___/___/___

Student (if over 18) _____ Date ___/___/___

IMPORTANT

Are you allergic to any drugs? _____

If so, which one(s) _____

Do you have any allergies? (i.e.: bee stings, dust) _____

Are you currently on any medication? _____

If so, what do you take? _____

Do you wear contacts while participating? _____

Any other significant information: _____
