

SACS Athletic Department

Permission Form

<u>Name of Student</u>	<u>Grade</u>	<u>Home phone #</u>
<u>Address</u>		
<u>Parent/Guardian's name</u>	<u>Cell Phone #</u>	
<u>Emergency Contact Person</u>	<u>Telephone #</u>	
<u>Family Doctor</u>	<u>Telephone #</u>	
<u>Family Medical Insurance</u>	<u>Policy No.</u>	

I understand there is an inherent risk in playing sports and that the range of injury can be minor to severe. It is further understood that in case of injury, the school is responsible only for first aid treatment. I also understand that all equipment/uniforms issued are the property of Salem Academy Charter School and is to be returned within 48 hours of the season close or I will assume the current replacement cost. To my knowledge, my son/daughter has not been treated for any pre-existing pathological conditions that could be aggravated by participating in interscholastic athletics. **List previous injuries or pathological conditions:**

I/We also give permission for my/our child to be transported to and from any athletic event. I understand the department policy will be to provide transportation by school bus/van for away games, but in the event transportation is not available, private transportation may need to be used.

In addition, we acknowledge that Salem Academy Charter School does not always provide transportation in certain sports to all practices and games therefore I may be required to arrange for transportation. I am aware that my son/daughter may be asked to walk or utilize public transportation or be transported to practice sites removed from Salem Academy Charter School.

I have read the SACS Athletics Handbook and the above statements, understand and agree to their terms and will help my son/daughter to carry out his/her responsibilities as a SACS student/athlete.

_____ has my permission to participate in interscholastic and/or intramural
(students name)

athletics for the **2011-2012 Academic Year**.

Parent or Guardian Signature

Date

Player Agreement

I agree to:

- Treat coaches, teammates, opponents, referees and spectators with courtesy and respect.
- Play to win but always fairly and with good sportsmanship.
- Accept the decisions of referees without gesture or argument.
- Control my temper and not use inappropriate, derogatory or vulgar language.
- Never criticize the play of others and never blame them for making mistakes.
- Follow the instructions of my coach(es) regarding playing time and position.
- Work hard, concentrate, cooperate and sacrifice for the good of the team.
- Be responsible for arriving on time and to notify my coach(es) ahead of time if I am going to be late or miss practices and/or games.
- Obey all team rules.

I understand that failure to comply with the above agreement may result in removal from the team.

Players Name: _____
(Please Print)

Signature: _____ Date: _____

Parent/Guardian Agreement

I understand that:

- The use of alcohol and tobacco products by parents or other spectators is prohibited during practices and/or games

I agree to:

- Not coach or give instructions to players including my own child during practices and/or games.
- Never openly express criticism for players of other teams.
- Never openly criticize referees during a game.
- Never confront the coach(es) with emotional issues in front of the players.
- Never use inappropriate, derogatory or vulgar language during a practice or game.
- Ensure my child has the means to arrive and be picked up on time for practices and games.
- Be a positive role model for others to follow.

I certify that I have read, understand and agree to adhere to the above athletic policies set forth by the Salem Academy Charter School Athletic Department.

Parent/Guardian Name: _____
(Please Print)

Signature: _____ Date _____