

Southwest Christian Academy

Athletic Registration Form

Please Completely Answer Each Question

Date of Last TAPPS Physical _____

Personal Information:

Student's Full Name (Last / First): _____

Sex: _____ Date of Birth: _____ Grade: _____

Date of first enrollment in 9th Grade _____ Date of enrollment this year _____

Residence Information:

Athlete Resides With: (Check One)

Parents: __ Mother: __ Father: __ Brother\Sister: __ Uncle\Aunt: __ Guardian Name: _____

Address: _____ Telephone: (_____) _____ - _____

_____ Email _____

TAPPS Student Not Living With Parents Form required if student lives with someone other than a parent. (TAPPS.net)

School Information:

School Last Attended: _____ School Address: _____

City/State: _____

Please list all sports (JV and Varsity) student participated in at previous high school(s): _____

TAPPS Transfer Form required if student has attended another high school.

Athletic History:

Indicate the number of years experience per sport:

___ Volleyball ___ Flag Football ___ Basketball ___ Track & Field ___ Golf ___ Cheerleading

Indicate the sports you are interested in:

___ Volleyball ___ Flag Football ___ Basketball ___ Track & Field ___ Golf ___ Cheerleading

Athlete / Parent Acknowledgment:

We have read all sections of the Southwest Christian Academy Athletic Information Handbook and agree to abide by the rules and guidelines in this handbook. We understand that questions concerning the Athletic Information Handbook should be directed to the Coach, Athletic Director, or Principal. We also have read the Emergency Permission Statement (including sections related to financial responsibility) and the Statement of Caution and agree to their terms as stated.

Parent Signature

Date

Athlete Signature

Date

Statement of Caution

It is the intention of Southwest Christian Academy to provide any athlete with good instruction, safe equipment, and safe transportation: but we cannot eliminate all risks involved in sports participation. Accidents and injuries are always possible.

This caution section is designed to provide the school with a degree of protection. It is not designed to deny the rights of an injured athlete. Participation in TAPPS and any other interscholastic activities is all voluntary and extra curricular. As a condition to participation in these activities, you and your parent(s)/guardian(s) must understand the risks involved in these kinds of activities.

CAUTION- Participation in any athletic activity may involve injury of some type to either yourself or a fellow student athlete. Such injury can include direct physical and possible crippling injury to ones body, and the possibility of emotional injury experienced as a result of witnessing or actually inflicting injury to another. The severity of such injury may range from minor to catastrophic injury such as complete paralysis or one's future ability to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Injuries can result from the incorrect or correct performance of playing techniques used in tryouts, practices, warm-ups, games, drills, exercise, and similar undertakings. Injury can also result from failing to follow game, training, safety, or other team rules. Injury can result from the use of transportation provided or arranged by the school to and from games and practices.

Therefore the purpose of this caution is to aid you in making an informed decision as to whether you or your child should participate in these activities. In addition, the purpose of this caution is to make you aware about and/or inquire of coaches, physicians, advisors, or knowledgeable persons about any concern that you might have at any time regarding the safety of participants.

By signing this document you acknowledge that you have read and understand its contents and warning related to the above stated risks and give permission for your child to participate in interscholastic athletic activities. In consideration of my child being allowed to participate, I/we assume responsibility for those risks associated with all athletic activities, including travel to and from the destination. I/we agree to hold harmless Southwest Christian Academy, its affiliated organizations, employees, agents, and representatives, including volunteers and drivers, from any and all claims arising from my child's athletic participation.

Parent Signature

Date

Athlete Signature

Date

Emergency Permission Statement

Financial Responsibility Form

(Forms are Combined for your Convenience)

Student Name: _____ Grade: _____ Date: _____

Medical/Accident Insurance & Number: _____

Physician Name & Number: _____

Hospital Choice (if available): _____

Allergies: _____

The coach or his/her representative may on occasion, if indicated, administer the following over the counter medications:

Circle Choices: Aspirin, Tylenol, Throat/Cough Drops, Advil, Antacids, NONE

I, the undersigned, do hereby authorize officials of Southwest Christian Academy to contact directly the persons named in this document, and do authorize the named physicians, clinics, and/or hospitals to render such treatment as may be deemed necessary in an emergency, for the health of said child.

In the event physicians, other persons named in this document, or parents cannot be contacted, the school officials are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the aforesaid child. (Section 35.01, Texas Family Code)

I certify that I am the parent with legal control of the child, the child's legal guardian, or have other court ordered control of the child. I understand that it is my responsibility to contact Southwest Christian Academy if I wish to change any information on this form or to revoke any consent given herein.

I will not hold the school or its personnel financially responsible for the emergency care and/or transportation for said child.

I certify that I will be personally responsible for all charges, covered or not covered by insurance, related to necessary treatment.

Parent Signature

Date