Student-Athlete Information

_____________________________________
Name

_____________________________________
Sport

Grade                                      Date of Birth

Instructions:
This form must be completed and signed by a parenting adult. Please read this form carefully and complete all sections. You are encouraged to contact Mr. Byerly with any questions you have regarding this form. Each RBCS student-athlete must submit a completed Certificate of Consent Form in order to participate in athletic activities for a given team. A new form must be submitted for each sport and for each season a student-athlete participates in. The completed form shall be submitted to the Athletic Director either electronically to [bbyerly@byerschool.org] or by hard copy to Mr. Byerly:

Consent to Participate in Athletics:
I agree to allow my child to participate in the following MPAA sport:

___ 7 vs 7 Football    ___ JV Boys or Girls Basketball    ___ Track
___ Cross Country        ___ Varsity Boys or Girls Basketball
___ Bowling              ___ Cheerleading

Certification of Parenting Adult
Through my signature, I hereby certify that I have read and understand the following, and that I agree to each of the following:

1. I, the parenting adult of the student named above, hereby give permission for my child to participate in all of the team’s activities (e.g. practices, scrimmages, contests, and community service), as directed by the coach. I understand that my child’s participation in this activity is purely voluntary. However, I understand that my child will be required to attend regularly scheduled practices and competitions.

2. I understand that my child will meet all RBCS athletic activities participation requirements, as set forth in the RBCS Student Athlete Handbook.

3. I understand that my child is responsible for his/her behavior at all times and I agree not to hold the RBCS athletic department, any RBCS employee or any MPAA member school or organization responsible for any expenses or damages incurred as a result of my child’s behavior.

4. I understand that it is necessary for my child to submit a completed Comprehensive Initial Pre-Participation Physical Examination form to the Athletic Director for his/her member-school or organization prior to participating in any RBCS athletic activities. I agree to inform the school of any change in my child’s medical or physical condition which develops or is discovered at any time after the date this document is signed.
5. I understand that with the participation in sports comes the risk of injury, particularly with contact sports. Such injuries may include, but not limited to, concussions and injury to bones, neck, spine or internal organs. I understand that risks involved and expressly agree to accept all the risks existing in the sport in which my child will be participating.

6. I agree to be responsible for the return of all equipment/uniforms by the RBCS Athletic Department to my child.

7. I understand and give permission for my child to travel unaccompanied on public transportation or accompanied by a coach on a bus to and from all scheduled practices and competitions.

8. To enable the MPAA to determine whether my child is eligible to participate in MPAA athletic activities, I hereby consent to the release to the MPAA of any and all portions of school records, beginning with the 5th grade, pertaining to my child, including but not limited to: birth and age records, name and residence address of parenting adult, residence address of your child, health records, academic work completed, grades received and attendance data.

9. I hereby consent to the RBCS Athletic Department’s use of my child’s name, likeness and athletically related information in reports of RBCS athletic activities, promotional literature of the RBCSAD and other materials and releases related to RBCS athletics.

10. I consent for an emergency medical provider to administer any emergency medical care deemed advisable to the welfare of my child related to any emergency medical issue arising from his or her participation in any RBCS athletic activity. In the even that such emergency medical issue arises, provided that reasonable efforts to contact me have been unsuccessful, this authorization hereby permits physicians to treat my child without first obtaining my direct approval to do so. I hereby agree to pay the reasonable expenses for any such emergency medical care, including but not limited to physicians’ and/or surgeons’ fees, hospital charges and related expenses.

11. I HEREBY RELEASE AND FOREVER DISCHARGE RUSSELL BYERS CHARTER SCHOOL AND ITS EMPLOYEES AND OFFICERS OF ALL FUTURE AND EXISTING CLAIMS, DEMANDS, OR CAUSES OF ACTION WHICH ARE IN ANYWAY CONNECTED WITH MY CHILD’S PARTICIPATION IN RBCS ATHLETICS, EXCEPT IF SUCH CLAIMS ARISE OUT OF THE GROSS NEGLIGENCE OR WILLFUL MISCONDUCT OF THE RBCS ATHLETIC DEPARTMENT, ITS EMPLOYEES OR ITS OFFICERS.

_________________________  ____/___/___
Parenting Adult’s Signature  Date