

UNIVERSITY ACADEMY INFORMED CONSENT FORM

Name of Student: _____

Academic School Year: **2019– 2020** Grade: _____ Birth Date: _____

Sport(s)/ Activity for which Permission to Participate is Granted:

(Please circle all sports/activities your child plans on participating in this school year)

Football Soccer (Girls) Basketball (Co-Ed)

Volleyball (Girls) Track Cross Country Tee - Ball

I, hereby give my permission for _____ to participate in the sport(s) or activity(s) circled above for the 2019 – 2020 school year. I also give permission for _____ to ride to and from all practices and/or games with University Academy coaches and/or staff. Further, I authorize the school to provide emergency treatment of any injury or illness my child may experience if qualified medical personnel consider treatment necessary and perform treatment. This authorization is granted only if I cannot be reached and a reasonable effort has been made to do so.

My child and I are aware that participating in the above circled sport(s)/activity(s) are potentially hazardous activities. I assume all risks associated with participation in these activities, including but not limited to falls, contact with other participants, the effects of the weather, traffic, and other reasonable risk conditions associated with this/these sport(s) or activity(s). All such risks to my child are known and appreciated by me.

In consideration, for providing my child with the opportunity to participate in this/these sport(s) or activity(s), I hereby release and hold harmless University Academy Charter School, their employees and volunteers from any liability for any injury that may be sustained while participating in such activity.

I understand this informed consent for and agree to its conditions on behalf of my child.

Parent/Guardian Signature

Date

PARENT PLEDGE FOR ATHLETIC TEAMS

Please read, initial each item, sign at the end, and return to your child's coach or another member of the UA coaching staff.

1. I pledge to be on time or early when dropping off my child for a practice or game. I understand that it is embarrassing for my child to be late to a game or practice and that I am putting him/her at physical risk by not providing adequate time for warm up. I understand the importance of picking up my child on time for all games and practices. This shows respect for the coach, who has other time commitments, and it tell my child that s/he is my top priority. _____
2. I understand that the top three reasons athletes play sports are to have fun, make new friends, and learn new skills. I understand that the game is for the athletes, and that I will encourage my child to have fun and keep sport in its proper perspective. I understand that athletes do their best when they are emotionally healthy, so I will be positive and supportive. _____
3. I will redefine what it is to be a "Winner" in my conversations with my child. A "Winner" is someone who makes maximum effort, continues to learn and improve, and does not let mistakes, or fear of making mistakes, stop them. I understand that mistakes are an inevitable part of any game and that people learn from their mistakes. I understand that all children are born with different abilities and that true measure is not how my child compares to others but how s/he is doing in comparison to his/her best self. _____
4. I will "Honor the Game." I understand the importance of setting a good example of sportsmanship to my child. No matter what others may do, I will show respect for all involved in the game including coaches, players, opponents, opposing fans, and referees. I understand that officials, coaches and other players make mistakes. If the referee makes a "questionable" call, I will continue to respect the individual and be silent! _____
5. I understand that games can be exciting times for my child who is trying to deal with the fast-paced action of the game, respond to opponents, referees, teammates, and listen to coaches. I will not add confusion by yelling out instructions. During the game, I will limit my comments to encouraging my child and other players for both teams. _____
6. I will not make negative comments about the game, coaches, referees or teammates in my child's presence. I understand that this plants a seed, which can negatively influence my child's motivation and overall experience. _____

I agree to honor the UA Parent Pledge in my words and actions.

Parent/Guardian Signature: _____ Date: _____

Print Athlete's Name _____

2019 - 2020
PLAYER INFORMATION

Name: _____ Grade: _____ Age: _____

Parents/Guardians' Names _____

Address: _____

Phone: _____

Email: _____

EMERGENCY CONTACT INFORMATION

In the event of an emergency and the parent/guardian cannot be reach, the following individuals will be contacted.

Contact #1

Name: _____

Phone: _____

Relationship: _____

Contact #2

Name: _____

Phone: _____

Relationship: _____

MEDICAL INFORMATION

Family Physician _____ Phone: _____

Medical Conditions/Allergies: (Please include any major illnesses or diseases)

Recent Surgeries: _____

Medications (Please list all current medications including over-the-counter) _____

INSURANCE INFORMATION (ALL ATHLETES MUST HAVE PROOF OF INSURANCE)

Insurance Company _____

Insurance Company Phone # _____

Policy Holder's Name _____

Policy # _____

Group# _____

Our family has read, understands, and agrees to follow all expectations of the 2019 – 2020 University Academy Handbook.

Date _____

Parent/Guardian Signature _____

Parent/Guardian Signature _____

Student Signature _____