

GARWOOD PUBLIC SCHOOLS
SPORT REGISTRATION AND PERMISSION FORM

This form must be filled out completely and signed before a student becomes a candidate for participation in any interscholastic sport of the Garwood Public Schools.

Part I – Student Participation (to be filled out and signed by candidate)

Name: _____ **Sport:** _____ **DOB:** _____
Address: _____ **Phone:** _____ **Grade:** _____

I, _____, hereby agree to conduct myself in an appropriate manner according to the laws of the State and the rules/requirements of my school and coaches. I recognize that I have accepted a challenge to be the best I can be by participating in the activity. I, therefore, agree that any conduct on or off school property in contrary to law and school rules and rules of my coach will result in dismissal from the above activity according to the policy set forth by the Board of Education. Further, I agree to be responsible for and will return all equipment issued to me or pay for that portion that is lost or unduly damaged.

Date: _____ **Student Signature:** _____

Part II – Parental Approval Form (to be filled out and signed by parent/guardian)

I agree to abide by the rules and regulations and I waive and release all rights and claims for damages against the Garwood Public Schools, their agents, representatives and assignees for any and all injuries suffered by the minor named above in said activities. I understand my child must maintain a “C” average in all academic subjects and maintain a good conduct record. I understand it is my responsibility to provide transportation for my child to and from the activity site. I understand I will conduct myself in a mature and appropriate manner at all games. I acknowledge I have submitted all appropriate medical information and updates and I am aware of the risk of concussion and sudden cardiac death. I understand it is my responsibility to update the coach if there is any change in medical condition in my child during the sport season.

Date: _____ **Parent/Guardian Signature:** _____

Part III – Emergency Contact Information

Mother’s Name _____ **Phone** _____

Father’s Name _____ **Phone** _____

Alternate Emergency Contact Name: _____ **Phone** _____

My child is allowed to walk home after the practice or game is completed

Yes _____ NO _____ Initial _____