ST. LAURENCE SCHOOL ATHLETICS PARTICIPATION CONSENT

STUD	ENT-ATHLETE NAME:		GRADE:
SPOR	T(S):		_ AMOUNT DUE:
Regist	tration fee: Volleyball - \$40; basketba	ll - \$40; Cheerleading	; - \$25
I herel	by give my consent to my child to partici	pate in the activity abo	ve for this school year.
partici	rstand that along with the signed consent pation by the student-athlete in practice of aximum charge of \$120 per family per year	or games. The fee is po	
	ny signature on this form:		
1.	I attest that my child is in good health a required for practicing and participating prior to participation .		
2.	I assume responsibility for the prompt t practice and games.	ransportation of the stu	ident-athlete to and from
3.	. I agree to provide monetary compensation to St. Laurence School Athletics for lost, damaged, or non-returned uniforms/equipment or for damages incurred at St. Laurence or any other facility while participating for St. Laurence School.		
5.	Uniforms will be turned in immediately I agree to participate in the ancillary act functioning of the program (Admission schedule will be sent home prior to the one, it is my responsibility to obtain one to work or switch with someone, I will	r following the completivities associated with s, Concessions, and Cl beginning of the seaso e from the school offic be charged a \$30 fee p	and necessary for the ean-up). I understand that a n, and if I do not receive e or website. If I am unable er occurrence.
6.	I am aware that the 7 th grade parents are Gold Day for the final home game of the	•	ed for 8 th Grade Black and
7.	•		
8.	• •	the Emergency Contac	t form. Due to the number
Signat	ure of Parent/Guardian:		
Date:	Fee Paid:	Check #	/Cash

Rev. 1/3/15