

Athletic Agreement for Participation Form

Name of Student: _____ Grade: _____ DOB _____

Parents Names: _____ Phone: _____

Email: _____

A general participation fee plus additional fees that may be required to participate in certain extracurricular activities at OSS. Checks may be written made payable to Our Saviour School. Other required documentation are Physical Examination Forms and IESA Concussion Forms , these forms only need to be submitted once a year. **All required documentation and Permission/ Participation form and fees must be turned in before your child is allowed to practice with the team.**

Emergency/ Insurance Information: (All Fields Required)

Emergency Contact Person: _____ Phone: _____

Insurance Company : _____ Policy/Group: _____

Allergies: _____ Medical Conditions: _____

Cross Country **Golf** **Cheerleading** **Baseball** **Softball**

Girls Basketball **Boys Basketball** **Volleyball** **Bowling**

Speech **Scholastic Bowl** **Track** **(Choose all that may apply this year.)**

We have read and understand the rules and regulations as stated in the Athletic Handbook and agree to conduct ourselves accordingly.

Athlete's Signature _____ Date _____

Parent's Signature _____ Date _____