

ST. DENNIS ATHLETIC SIGN-UP FORM

2008 Fall CYO Soccer

PLAYER NAME _____ DATE _____
ADDRESS _____ CITY _____ ZIP _____
PHONE _____ PARENTS _____
BIRTHDATE _____ GRADE _____ (CIRCLE ONE) BOY GIRL _____
MEDICATIONS OR REMARKS _____
SCHOOL _____ PARISH _____
E-Mail _____
SHIRT SIZE S ___ M ___ L ___ ADULT S ___ ADULT M ___ ADULT L ___
Shorts SIZE S ___ M ___ L ___ ADULT S ___ ADULT M ___ ADULT L ___

J.V. Girls _____

Varsity Girls _____

J.V. Boys _____

Varsity Boys _____

DO NOT INCLUDE PAYMENT AT THIS TIME

We will collect payment at Uniform distribution

Athletic Fee \$80.00 plus \$75.00 Uniform deposit (separate check)

ATHLETIC STATEMENTS

1. RULE AND REGULATIONS

We, the player and parents, agree to abide by all rules and regulations of the school, athletic department, parish and CYO and are subject to any disciplinary action taken by those organizations.

2. RELEASE OF LIABILITY

I assume all personal responsibility for _____ and will not hold the parish, school, coaches, athletic department officers and directors, and CYO and it's officers and directors responsible for any injuries incurred in any contest or practice held under the direction of St. Dennis Parish.

In the event of an injury, only basic first aid in the form of ice application or action to stop severe bleeding will be administered. At all times, in the event of serious injury, if I am not available, 911 will be called

My child is in good health and physical condition and can participate in competitive sports.

I am aware that sport participation is rigorous and that risk of injury exists.

3. EMERGENCY MEDICAL AUTHORIZATION

I give permission to a licensed physician and health care facility to examine and render medical care to my child if I cannot be reached immediately.

If I cannot be reached, please contact _____ phone _____

PARENT SIGNATURE _____

DATE _____