



2008-2009 Activity Policies Eligibility Statement

I have read, understand and acknowledge receiving the 2008-2009 Activity Policies Brochure.

As a student participating in extracurricular activities at STRIDE Academy, I understand and accept the following responsibilities.

1. *I will respect the rights and beliefs of others and will treat others with courtesy and consideration.*
2. *I will be fully responsible for my actions and the consequences.*
3. *I will respect the property of others.*
4. *I will respect and obey the rules of my school and the laws of my community, state and country.*
5. *I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.*

Informed Consent: By its nature, participation in athletics includes risk of injury and the transmission of infectious diseases such as HIV, Herpes and Hepatitis B and others. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in athletic programs, it is impossible to eliminate all risk. Participants must obey all rules, report all physical and hygiene problems to their coaches, follow proper conditioning program and inspect their own equipment. Do not sign this form if you are not comfortable with its terms.

I consent to the coach treating injuries and authorize them to discuss those injuries with and release any applicable medical information or records relating to those injuries to coaches, school staff and other qualified health care providers as deemed necessary within their scope of practice.

I further understand that in the case of injury or illness requiring transportation to a health care facility that a reasonable attempt will be made to contact the parent/guardian, but that, if necessary, the student-athlete will be transported via ambulance or quickest transport to the nearest hospital.

I understand and release any liability from injury during the transport in emergency situations and also to and from activity competitions.

Student's Signature

Grade

Date

Parent's or Guardian's Signature

Date

Phone Number