

Abundant Life Christian School

2018-2019

ATHLETIC PARTICIPATION CONTRACT

- I have received a copy of the Athletic Handbook.
- I agree to abide by all rules and regulations set forth in this handbook.
- I agree to pay for any and all equipment, which I may lose, misplace, or damage through carelessness or intent. I further agree to assume full responsibility for all equipment issued to me, and to confine the use of that equipment to practice, games, and/or meets.
- I understand that injuries could occur as a result of participation in athletics. I understand that these injuries could include minor injuries such as bruises or abrasions, muscle strains, sprains, or broken limbs. I understand that it is possible that a catastrophic injury could occur rendering me paralyzed, and that death could also occur as a result of a catastrophic injury.

Student Signature

Date

AGE

High School (9-12)

FEES

\$150 for the first sport (Exception: Golf \$200 and Track \$135)
\$110 for the second sport
\$90 for the third sport

Middle School (4-8)

\$90 Volleyball
\$90 Basketball
\$90 Track
\$90 Golf
\$65 Flag Football

Homeschool (4-8)

\$120 per sport (Payment due before the 1st practice)

I, as parent/guardian of _____, have received a copy of the ALCS Athletic Handbook and will use the rules and policies set forth for athletic participation at Abundant Life Christian School. I give my son/daughter permission to participate under these conditions. I will do my part in seeing that he/she follows these rules and regulations. I also give permission to the attending physician to give first aid and emergency treatment to my son/daughter should he or she require such assistance. I will also be responsible for payment of lost or damaged equipment (at replacement cost), and all fees required for my child to participate in each athletic season.

I understand that injuries could occur as a result of participation in athletics. I understand these injuries could include minor injuries such as bruises or abrasions, muscle strains, sprains, or broken limbs. I understand that it is possible that a catastrophic injury could occur rendering my son/daughter paralyzed, and that death could also occur as a result of a catastrophic injury. I give permission for my son/daughter to participate with this understanding.

I understand that the Abundant Life Christian School Athletic Handbook requires that students ride the buses to and from all athletic events and a departure from this requirement will release Abundant Life Christian School from all liability for any adverse results that may occur. I agree to release Abundant Life Christian School and its employees from all liability with reference to the above stated transportation policy if I choose to transport my child home independently.

Parent/Guardian Signature

Date

FOR OFFICE USE ONLY:

Date Received: _____ Office Signature: _____