

Player Insurance And Emergency Information

Submit \$50.00 for the Athletic Fee per sport. Only High School requires a yearly physical.

(Circle) Male/Female Grade _____

Name: _____ Date of Birth: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Mother's Name: _____ Father's Name: _____

Step-Parent(s) Name: _____ Legal Guardian(s): _____

Mom Cell Phone: _____ Dad Cell Phone: _____

Step-Parent Cell Phone: _____ Legal Guardian Cell Phone: _____

Student Cell Phone: _____ Student E-Mail _____

Doctor's Name: _____ Phone: _____

Insurance Company: _____ Policy No.: _____

Allergies: _____

Medication: _____

Emergency Contact Numbers (Name, Phone, Relationship to Player):

I hereby authorize the Fremont Christian School representative to act for me according to their best judgment in any emergency requiring medical attention for my child and I hereby waive and release Fremont Christian School, and their representative, from any and all liability for any injuries or illness my child may incur while in their charge.

Parent(s) Signature: _____

or Legal Guardian(s) Signature: _____

Date: _____

Fremont Christian Parent/Legal Guardian Athlete Contract

This contract is for the athlete: _____
(name of athlete)

Parent(s)/Legal guardian(s) and the above athlete has read this contract and **agree** to each of the following statements. This means you understand what each statement requires from both the athlete and the athlete's parent(s)/legal guardian(s) and are committed to following these rules at all times. By signing this document, the athlete takes the first step to becoming eligible to participate in FCS athletics.

1. I have read the Parent/Student Handbook and agree to support the Fremont Christian School philosophy of athletics.
2. Parent(s)/legal guardian(s) and the above athlete hereby agree that the student shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. We also recognize that under CIF Bylaw 200, there could be penalties for false or fraudulent information. We also understand that the Fremont Christian policy regarding the use of illegal drugs will be enforced for any violations of these rules.
3. I agree to check our personal family schedule to insure that my child demonstrates responsibility and commitment by attending **all** scheduled practices and games. I will discuss all conflicts with the coach a minimum of one day prior to the conflict.
4. If a student athlete misses any practice or game, I understand that the consequences outlined in the Parent/Student Handbook will be enforced.
5. If any problems or conflicts should arise, **I agree first to seek a solution with the coach** and then follow the conflict resolution policies as stated in the Parent/Student Handbook.
6. I understand that I must attend the Sportsmanship Meeting at the beginning of each school year in addition to the coach's meeting at the beginning of each season as scheduled by the coach. My attendance at these meetings will qualify my child to become eligible in sports. Failure to attend these meetings will make my child **ineligible to participate** until a meeting with both the Athletic Director and the coach can be completed.
7. On occasion, FCS Athletic Department will take photographs at games and use them on our website and names will not accompany photographs. Your signature constitutes legal consent for FCS to publish photographs of your child. **Mark the box with an "x" if you withhold consent.**

Mother name printed

Mother signature

Date

Father name printed

Father signature

Date

Step-mom name printed

Step-mom signature

Date

Step-dad name printed

Step-dad signature

Date

Legal Guardian(s) name printed

Legal Guardian(s) signature

Date

Student name printed

Student signature

Date

Fremont Christian Parent/Legal Guardian

Driving Form

(Check-off all that applies)

I give permission for my child _____, to travel to all games under the circumstances checked below. I will write a special note for any other circumstances that may come up. If the school bus or school van isn't available I agree to the following checked items:

I give permission for my child to ride with the coach in his/her personal car.

I give permission for my child to ride with a teammate's Parent/Legal Guardian to and from games in his/her personal car that have turned in the *Fremont Christian School Driver's Liability Statement*.*

I have filled out the *Fremont Christian School Driver's Liability Statement** and turned it in to the Athletic Office and are willing to drive my child and others.

I give permission for my child to drive his/her private vehicle for which we have filled out the *Fremont Christian School Driver's Liability Statement** and turned it in to the Athletic Office or coach.

I give permission for my child to take the following students with him/her in the car:

I give permission for my child to ride in a private vehicle to and from games with the following list of drivers who have turned in the *Fremont Christian School Driver's Liability Statement**:

I will drive my child to his/her games and pick them up.

Parent(s)/Legal Guardian(s) Signature(s)

Date

* *Fremont Christian School Driver's Liability Statement* is attached.