

**BETHANY LUTHERAN SCHOOL
PARENTS' SPORTS COMMITMENT
PERMISSION FORM**

We will:

- Provide a current sports physical by a medical doctor prior to the first practice.
- Complete "Athletic Medical & Emergency Form".
- Provide my child with proper health insurance coverage in case of injury.
- Monitor his/her academic work and encourage him/her to maintain high academic standards.
- Provide transportation for my child to and from all practices and meets.
- Have my child at practices and meets on time and pick my child up promptly after practices and games. Late pick up may disqualify my child from participation.
- Support the teams by actively participating as a spectator and volunteering to help with the score table and concessions throughout each season at least 2 times. MANDATORY
- Set a positive example in my attitudes and behavior as outlined in our *Christian Sports Code*.

ALL ATHLETES MUST PAY A PARTICIPATION FEE BEFORE ATTENDING THE FIRST PRACTICE. PLEASE SEE ATHLETIC FEE FORM.

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I acknowledge that _____ is in good health, and I hereby give my
Child's Name
consent for him/her to participate in the following activity(ies): **Please circle ALL choice(s):**

5/6 Co-ed Volleyball 7/8 Girls Volleyball 6/7/8 Boys Volleyball 5/6 Girls Basketball
5/6 Boys Basketball 7/8 Girls Basketball 7/8 Boys Basketball 5/6 Cheerleading
7/8 Cheerleading 4-8 Track

Parent Signature _____

Date _____ Phone _____

Email _____ (REQUIRED)