

~ ATHLETIC WAIVER OF LIABILITY ~

Print, complete, and return this form to the coach or Athletic Office.

Student _____ Grade _____ Birth date _____

St. Anne Athletic Department/CYO Sports Program Registration

This form must be completed by the student and his/her parents and approved by the Athletic Department before a student is allowed to participate or tryout for an activity sponsored by St. Anne Parish/School.

**Parent's or Guardian's Permission & Waiver of Liability
& Authorization for Emergency Care**

I hereby give my consent for the above named student to participate in team sports. I am fully aware of the risks of injury associated with participating in any sports activity. I understand that participation in team sports is purely voluntary, and I understand that St. Anne Parish/Athletic Department and St. Anne School provide no insurance coverage and do not take responsibility for the payment of any medical expenses.

I authorize the Athletic Director, School Principal, Coach or Sponsor in attendance at any sport event to select and secure medical attention as may be necessary for my child as a result of injuries requiring emergency care while I/we are not attending on and off site practices and games. I hereby release parish/school official/coach from any and all liability. I, as his/her parent or legal guardian, authorize this care to be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent. I have read this Waiver of Liability and fully understand and accept its terms and sign it voluntarily.

Father/Guardian Signature _____ Cell Phone () _____ - _____

Mother/Guardian Signature _____ Cell Phone () _____ - _____

Address _____ City _____ State _____ Zip _____

Alternate Emergency Contact: _____ Cell Phone () _____ - _____

Family Doctor _____ Phone # _____

Preferred Hospital _____

Family Medical Insurance Name _____ Under _____

Group or ID # _____

Medical History – Allergies: Drugs/Food _____ Asthma _____

Any other medical condition which activity coaches should be aware of

Parent Understanding

I understand participation in athletic sports can be an extremely valuable experience for young people. The Athletic Department coaches are volunteers and provide athletes with on and off season opportunities to develop and maintain physical fitness. All information given above is accurate.

Parent Signature _____ **Date** _____