

Stewarts Creek High School



Athletic Permission and Responsibility Acknowledgment

_____ Athlete's Name (PLEASE PRINT)

Year in School (Circle one) 9 10 11 12

Birth Date: _____

Sport(s): _____

Signatures at the bottom of this form indicate that the athlete has permission to tryout and participate in any sport or activity at Stewarts Creek High School.

As a Stewarts Creek High School student athlete participating voluntarily in interscholastic athletics, I understand that:

1. I and my parent(s)/legal guardians(s) will abide by the rules and conditions set forth by Tennessee Secondary School Athletic Association (TSSAA), Rutherford County Schools (RCS), the student conduct rules of Stewarts Creek High School, and the coaches and team rules.
2. I and my parent(s)/legal guardians(s) will notify the coaches of any change of address that occurs throughout the school year as soon as it occurs.
3. I and my parent(s)/legal guardians(s) will conduct ourselves in an exemplary social manner and display good sportsmanship at all times.
4. I and my parent(s)/legal guardians(s) will have proper and timely transportation to and from all team events such as practice, fundraisers, and games. This includes being picked up on time from the school if bus transportation is provided.
5. I and my parent(s)/legal guardians(s) will be responsible for all athletic equipment issued to me throughout the season, will promptly return such equipment clean at the end of the season, and will pay for any of the equipment not accounted for by me at the end of the season.
6. I and my parent(s)/legal guardians(s) acknowledge that by participating in interscholastic sports I am exposing myself to the risk of injury, including but not limited to, the risk of sprains, fractures and ligament and/or cartilage damage which could result in a temporary or permanent, partial or complete impairment in the use of my limbs, brain damage, paralysis, or possible death. Having been so cautioned and warned, it is still my desire to participate in sports and to do so with full knowledge and understanding of the risk of injury.

I, along with my parent(s)/legal guardian(s), certify that I have read and understand all of the athletic policies listed above, and in order to be eligible for participation I must comply with all requirements listed.

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____