



# Queen of Heaven School Sports Permission Form

**2024 Fall Sports Season**



Circle One:	Co-ed Soccer				Boys Baseball	Girls Volleyball	Cross Country
	(Grades 1-2)	(Grades 3-4)	(Grades 5-6)	(Grades 7-8)	(Grades 5-8)	(Grades 5-8)	(Grades 5-8)

Please submit separate Permission Slips for each child and for each sport that you are signing up for.

### 1. Player's Information:

STUDENT:		Grade during 2024-25 School Year:
ADDRESS:		Date of Birth:
JERSEY SIZE:	(Circle): YS YM YL YXL AS AM AL AXL	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female

### 2. Parent / Guardian Information:

	<u>Mother</u>	<u>Father</u>
Name:		
Email:		
Home Phone:		
Cell Phone:		
Interested in Coaching:	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No
<b>Alternate in Case of Emergency:</b>	Name:	Phone:

### 3. Player's Health Information:

Allergies, Medications or Medical Conditions:	Additional Comments or Instructions:
<p><b>PHYSICALS:</b> I understand that physicals must be completed and forms handed into the QOH Health Office before any student can participate in a sport.</p> <p style="text-align: right;">Initials: _____</p>	
<p><b>CODE OF ETHICS:</b> I have read and will follow the Code of Ethics from the Diocesan Handbook. My signed Code of Ethics is attached.</p> <p style="text-align: right;">Initials: _____</p>	

### **Consent for Medical Treatment and Release of Liability:**

<i>I request that in my absence my child be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians and staff, to perform diagnostic, treatment, and operative procedures and X-ray treatment of the above child. I have not been given a guarantee as to the results of the examination or treatment.</i>	<b>Initial for Consent:</b>
<i>Recognizing the possibility of injury associated with playing a sport, and in consideration of QOH accepting my child for its sports program and activities, I hereby release, discharge and otherwise indemnify Queen of Heaven School, its coaches, affiliated organizations and personnel, including the owners of the fields and facilities utilized for all League/Tournament contests, against any claim by or on behalf of the player as a result of the player's participation.</i>	<b>Initial for Consent:</b>

<p><b>Registration Fee:</b> I have included a check for \$25 made out to "Queen of Heaven – Sports Program" with (a) my child's name, (b) grade, (c) sport and (d) notation "Registration Fee" noted on the check.</p> <p style="text-align: center;">Check # _____</p>	<p><b>Uniform Deposit:</b> I have included a check for \$75 made out to "Queen of Heaven Sports Program" with (a) my child's name, (b) grade, (c) sport and (d) the notation "Uniform Deposit."</p> <p style="text-align: center;">Check # _____</p>	<p><b>Deadlines:</b> I understand that no player will be guaranteed a roster spot on any team unless Permission Slips, fees and deposits are turned in on or before July 15, 2024.</p> <p style="text-align: right;">Initials: _____</p>
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Please send the Permission Slip, registration fee and uniform deposit to the School Office in an envelope labeled "Sports Forms."

<b>X</b> Signature of Parent/Guardian	Date:    /    /2024
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