

## ST. BENEDICT ATHLETIC ASSOCIATION SPORTS REGISTRATION

CIRCLE ONE:	CIRCLE ONE:	CIRCLE ONE:	CIRCLE ONE:
FALL	BOYS	CROSS COUNTRY	CHEERLEADING
WINTER	GIRLS	BASEBALL	TRACK & FIELD
SPRING		SOFTBALL	VOLLEYBALL
		SOCCER	BASKETBALL

STUDENT				
FIRST NAME	LAST NAME			
DATE OF BIRTH	AGE	GENDER		
GRADE	CLASS	SHIRT SIZE		
HOME ADDRESS				
CITY	STATE	ZIP CODE		
HOME PHONE NUMBER				

PARENT				
FIRST NAME	LAST NAME			
MOBILE PHONE	EMAIL			
FIRST NAME	LAST NAME			
MOBILE PHONE	EMAIL			
PARENT/GUARDIAN SIGNATURE		DATE		

**PHYSICALS:** Any student, who does not submit a sports physical form to the school nurse and is not approved by the school nurse, will not be eligible to participant in any sport program.

**CONSENT & RULES:** As the parent or legal guardian of the above named student, I hereby consent to and give my approval to his/her participation in any and all activities associated with the registered sport. This consent and approval extends to any and all activities of any individual team or team affiliated with St. Benedict School. I assume any and all risks and hazards associated with his/her participation in the above registered sport. I hereby waive, release, remise, absolve, indemnify, and agree to hold harmless St. Benedict's Parish, St. Benedict's Athletic Association on a voluntary basis (defined to include those performing services pursuant to their retainer commitment) of and from any claim arising out of injury to my child.

**REGISTRATION:** A registration form must be submitted for each student and for each sport. All checks are made payable to SBS AA.

I understand at any time the sports program will be discontinued if COVID guidelines are not followed and if the participation of the sport jeopardizes the ability to provide in-person education for all SBS students.