



Players Get Ready!

Saint Mary School Basketball

- Players Needed: Grades 5-8, girls and boys
- Practice one evening per week (TBD)
- \$100.00 registration fee per player.
- Friday or Saturday games for boys and Sunday games for girls: December through March
- Games held at OLV, St. Bernadette's and/or Venerini Academy (Subject to change)
- Questions? Please contact Mr. W (liam.wintroath@stmarystudent.org)

*If interested, please complete and return with registration fee by
Wednesday November 8, 2023 to the School Office.*

Student Name: _____ *Grade:* _____

(circle one) Shirt Size: YM YL AS AM AL AXL

(circle one) Short Size: YM YL AS AM AL AXL

Parents:

If interested in Coaching or Assisting, please provide contact information. Without coaches we can not field teams.

Name (Print): _____

Contact: Phone _____ *Email* _____

Saint Mary's Athletic Participation Release Form

Player Name: _____ Birthdate ____/____/____ Age: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian Name: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

Existing Medical Coverage: _____ Plan #: _____

Known Allergies: _____

Current Medications: _____

I hereby voluntarily permit my child to participate in **Saint Mary's Athletics**. I understand and fully accept that there are risks and requirements for participation in Saint Mary sports, and that accidents and injuries are common and are ordinary occurrences of sports. I hereby agree to accept any and all risks of injury or death, and verify his statement by signing below. I understand that the following guidelines and protocol exist, and will respect them if they must be instituted with the above-named athlete:

- a. An athlete who is suspected of sustaining a concussion or head injury shall be immediately removed from participation for the remainder of the day. Removal can be at the request of the coach, official, parent/guardian, or athlete.
- b. An athlete removed from participation for a medical evaluation shall not be permitted to return to participation until a medical release signed by an appropriate medical professional has been provided to the school.
- c. I understand that my child must maintain their eligibility both academically and behaviorally at Saint Mary School in order to fully participate in the season.

☐ I have read the training information on the CDC website regarding recognizing the signs and symptoms of a head injury. The link for the training can be found [here](https://www.cdc.gov/headsup/pdfs/youthsports/parents_eng.pdf). (https://www.cdc.gov/headsup/pdfs/youthsports/parents_eng.pdf)

As consideration for being permitted by **Saint Mary's** to participate in these activities, I hereby release and hold harmless **Saint Mary's School**, staff, volunteers, designated coaches, and program officials from all liability, and from all actions or claims that I or my child now or hereafter have for damage or injury to me or my child, or to any person or property, resulting from the negligence or other acts of any employees or volunteers in connection with my child's participation. I further agree that this waiver, release and assumption of risks are to be binding on the heirs and assigns of the undersigned. I further agree to indemnify and to hold **Saint Mary's School** (its officers, employees, agents and volunteers) free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage that my child may cause or sustain while participating in this activity. In case of a medical emergency, I hereby give permission to **Saint Mary's** Staff and Volunteers to order treatment for my child, including any necessary medical treatment and x-rays. I also hereby give permission to **Saint Mary's** Staff and Volunteers to disclose the information contained on this form to medical personnel. I understand that an attempt will be made to reach me by phone in case of an emergency.

I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND SAINT MARY SCHOOL AND SIGN IT OF MY OWN FREE WILL.

Date _____

Parent or Guardian Signature