

Holy Trinity Interparochial School Sports Program
2007 – 2008 Registration/Permission Form

Sport:	<input type="checkbox"/> Cross Country	<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Volleyball	<input type="checkbox"/> Bowling
<input type="checkbox"/> Basketball	<input type="checkbox"/> Golf	<input type="checkbox"/> Softball	<input type="checkbox"/> Track & Field	<input type="checkbox"/> Other _____

Complete this page and return **to coach** by _____, with **registration fee of \$** _____ (checks made payable to Holy Trinity Sports Program).

Child's Name: _____ Date of Birth: _____ Grade: _____

Parents Names: _____

Child's Address: _____

Home Phone #: _____ Email _____ (all addresses) _____

Parent Address (if different from child's) _____

Work Phone(s): _____ Mobile Phone(s): _____

I, the undersigned parent or guardian of the child named above, have read the attached sports program requirements and agree to all the policies for my child and myself. I hereby give my permission for my child to participate in all activities of the Holy Trinity Interparochial School (HTIS) sport program noted above for the 2007-2008 season. I support this participation and will volunteer my time to assist at home games/meets and the HTIS Sports Program's fundraisers (tournament, track meet, etc.). I certify that my child is physically able to participate in rigorous physical activity and that my child's physician is aware of and approves of my child's participation in this activity. I assume all risks and hazards incidental to my child's participation and hereby release and indemnify HTIS, its organizers, sponsors, volunteers, coaches, teachers, and supervisors from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player's participation in the HTIS Sports Program including, without limitation, player's transportation to/from any program. I give permission for the adult coaches of this program to seek any medical assistance deemed necessary on behalf of my child while participating in this program. I hereby authorize the treatment by a qualified and licensed medical doctor in the event of a medical emergency, which, in the opinion of the attending physician, may endanger my child's life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me. I also assume the financial responsibility for any medical treatment for my child.

Parent/Guardian
Signature _____ Date: _____

STUDENT DECLARATION: I have read the attached sports program requirements and understand that my participation in any HTIS Sports program requires my schoolwork be done on time and to the best of my ability. I also understand that I must obey all school rules as well as the rules and procedures of any team(s) that I join.

Student Signature: _____ Date: _____

Holy Trinity Interparochial School Sports Program
Requirements for Students and Parents/Guardians
2007-08

Keep these 2 pages for future reference.

Students:

1. Playing sports at HTIS is a privilege and academics are the student's first priority.
2. Students will be respectful and observant of all school rules and regulations.
3. Students will listen and follow the coach's instructions.
4. Students will make every effort to be on time for all practices and to arrive ½ hour before start time for all games/matches/meets.
5. Students will respect their teammates, the opposing players and coaches, and game/match/meet officials. Students will not engage in any unsportsmanlike activities including inappropriate language, taunting, "trash talking" or fighting with their teammates or opponents. Any of the above may result in consequences at the discretion of the coach.
6. Students will accept defeat gracefully and victory humbly.
7. Students will respect the equipment and property of HTIS, as well as those of the opposing schools.
8. Students agree to stay in the bench/team warm-up area when not playing/participating in the game/event unless given permission by the coach.
9. Students understand that playing on more than one team/sport in the same season requires notification to each coach and communication to all coaches about any conflicts.

Parents/Guardians;

1. Parents/Guardians will set a positive Christian example for the students of HTIS and will treat with respect all players, coaches, parents, fans, officials, and physical property.
2. Parents understand that for a child to participate in sports "he/she must maintain acceptable academic standards and appropriate conduct" (see School Handbook).
3. Parents/Guardians will have their child show up on time for all games/matches/meets and practices, and pick up their child on time at the conclusion of each practice or game/meet/match unless other arrangements are made prior to the event.
4. Parents/Guardians will call the coach in advance if their child is unable to attend a practice or game/match/meet.
5. Parents/Guardians will cheer in a positive manner at all times and restrict their comments and actions to those that will encourage rather than discourage. They will use only appropriate language.
6. Parents/Guardians will support the coaches and their decisions. They will support the decisions of all game/match/meet officials. Parents/Guardians agree not to speak to their child's coach for 24 hours prior to and/or 24 Hours after a game/match/meet regarding their coaching philosophy, team strategy, play calling or the amount of playing time their child has or will receive.
7. Parents/Guardians will be available to help at HTIS home games/matches/meets, as assigned by the coach or team coordinator.
8. JV and Varsity teams play in a competitive league environment against and the playing time in may not always be divided equally. [Coaches for the developmental teams have been

instructed to divide the playing time as equally as possible among the students who show commitment to the team.]

9. Parents/Guardians will have their child wear the complete uniform given to their child to all games/matches/meets and will properly care for the uniform. [Machine wash in cold water, no bleach, and hang dry only – do not use the dryer. No ironing.] Parents/Guardians returning damaged uniforms outside of normal wear and tear will be charged accordingly.
10. Parents/Guardians understand that if their child plays on more than one team/sport in the same season, this requires notification to each coach and communication to all coaches about conflicts and missing of any practices and games/matches/meets.
11. Any concerns Parents/Guardians have should first be discussed with the coach. If the resolution is not equitable, the issue should be discussed with the Sport Director and, if necessary the Athletic Director. A representative of the Athletic Department must be present at any meeting between the child's coach and parent(s).

_____ **Director:**

Home Phone:

Email:

Athletic Director: Jim Killeen

Home Phone: 908-490-1694

Email: jpk_50@comcast.net

Team Information:

Coach:

Home Phone:

Email: