



# Student Information & Parental Approval Form

---

## STUDENT INFORMATION (Please Print)

Student Name \_\_\_\_\_ D.O.B \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

School Attended Last Year \_\_\_\_\_

Name(s) of Parent(s)/Guardian \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Describe any physical limitations or problems that should be known by the coach or school authority:

---

---

Please list recent injuries:

---

---

## STUDENT RIGHTS

Students participating in the Interscholastic Athletic Program are governed by the rights, protection and responsibilities as prescribed by the Washington Interscholastic Activities Association handbook, the Metropolitan League by-laws and their respective schools.

Students and/or their parent(s)/guardians may make application for exceptions to league and WIAA eligibility regulations and may appeal any decisions relative to such requests through their school principal.

## STUDENT RESPONSIBILITIES

Participants are required to conform to the rules and regulations of their school, Metropolitan League, and the WIAA; and to conduct themselves in a safe and sportsman-like manner. Violators are subject to probation, suspension, or expulsion.

## STUDENT ELIGIBILITY REQUIREMENTS

1. Prior to participation in practice or athletic contests a student must:
  - a. Have received medical clearance from a licensed physician during the 13 month period prior to participation and shall have on file in the school office a physical examination form stating that the athlete has passed a physical examination within the last two years.
  - b. Have on file in the school office a signed Student Information and Parental Approval Form.
2. To be eligible to participate in an Interscholastic contest a student must:
  - a. Be under twenty (20) years of age on September 1 for the Fall sport season; on December 1 for Winter sport season.
  - b. In regards to academic eligibility requirements, refer to the Student Handbook.
  - c. Reside with their parents, the parent with legal custody, or a court-appointed guardian who has acted in such a capacity for a period of one year or more.
  - d. Not miss practices or games for the purpose of participating in non-school athletic activities.
  - e. Not accept cash awards in any amount or merchandise of more than \$300.00 in value, or have ever signed a contract with or played for a professional athletic organization.
3. Students shall be entitled to six consecutive years of participation after entering the seventh (7) grade.
4. A student completing the highest grade offered in the elementary, junior or middle school is eligible for athletic participation upon entering a public or non-public high school. After starting his attendance in high

school, a student which transfers voluntarily or involuntarily to another high school without a change in residence, shall become ineligible and will have to go before an eligibility committee to have his eligibility reinstated.

5. A student must be in school the full school day or be excused by the principal or his designee to participate in any event or meet. A student is not eligible to participate or attend any school function or practice if he has been absent for more than half a day. Any student missing three periods in a day will be marked absent for a half a day.
6. Your athletic eligibility can be adversely affected by:
  - a. Providing misleading or false information relative to factors which affect your eligibility (minimum loss of one year's eligibility).
  - b. Missing a game or practice to participate in an out of school athletic activity.
  - c. Participating in an athletic activity under a false name.
  - d. Disruptive behavior during practice and/or games.
  - e. Irregular attendance at school or practice.
  - f. Committing and/or aiding or abetting in the commission of any physical abuse or attack upon any person associated with athletic practice or contest.
  - g. Using a school uniform in a non-school athletic event or failure to maintain proper care or return of athletic equipment.

We have read, understand and agree to abide by the Student Rights and Responsibilities and Student Eligibility Requirements listed on this form.

We are aware that playing and practicing in any sport can be a dangerous activity involving many risks of injury. We understand the dangers and risks of playing or practicing the following sports include, but are not limited to: death, serious neck and spinal injuries (which may result in complete or partial paralysis or brain damage); and serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular-skeletal system.

Because of the dangers of participating in the following sports, we recognize the importance of following the coach's instructions regarding playing techniques, training, rules of the sport, other team rules, and to obey such instructions.

We agree that neither O'Dea High School, nor the Archdiocese of Seattle, nor the school districts comprising the Metropolitan High School league nor the employees of said school districts, nor the student organization of said school districts, shall in any way be held liable for any accident or injury in any way received on account of or while engaged in any athletic activity sponsored by said school districts. We further agree that neither the aforementioned school districts nor any of their employees or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries.

*Please check all sports for which the student will participate:*

<input type="checkbox"/> <b>ALL SPORTS</b>	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Soccer	<input type="checkbox"/> Tennis
<input type="checkbox"/> Football	<input type="checkbox"/> Basketball	<input type="checkbox"/> Track	<input type="checkbox"/> Baseball
<input type="checkbox"/> Cross Country	<input type="checkbox"/> Golf	<input type="checkbox"/> Swimming	<input type="checkbox"/> Lacrosse

*Please indicate whether or not your family has medical insurance:*

**Our family has medical insurance**                       **Our family does not have medical insurance**

Signed \_\_\_\_\_ Date \_\_\_\_\_ Signed \_\_\_\_\_  
(Parent or Guardian) (Student Signature)