

## Sacred Heart Academy Sports Permission Slip & Emergency Information

**Permission slips must be on file for each sport and completed before the first practice. The undersigned is responsible for all equipment/uniform at full value.**

Please enclose \$60 registration fee made payable to Sacred Heart Academy.

I give permission for \_\_\_\_\_ in grade \_\_\_\_\_ to participate on the \_\_\_\_\_ team at Sacred Heart Academy.

Furthermore, we (I) the undersigned as parent (s) or legal guardians of \_\_\_\_\_ do hereby consent to release Sacred Heart Academy and any and all of its agents from any liability arising out of or in any manner related to transporting students from and to Sacred Heart Academy by car for sports events. Drivers must be at least 21 years of age with a current California Driver's license and proof of insurance (in their vehicle and on file at S.H.A.) Seat belts are required for all passengers. In the event of a medical emergency, we (I) further consent to the decision made by the school or any and all of its agents relating to the provision of medical assistance.

I understand that if my child is involved in After-School Sports, my participation is required for driving him/her to/from practices or providing refreshments. Students must attend practice in order to be eligible to play.

Last Name	Telephone	Year
Home Address	City	Zip
Father First Name	Employer	Hours
Work Address	Wish to be Called	Telephone
Mother First Name	Employer	Hours
Work Address	Wish to be Called	Telephone

Cell Number	Cell Number
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**STUDENT INFORMATION**

Student First Name	Birth Date	Grade	Precautions

**EMERGENCY CARE INFORMATION (OTHER THAN PARENTS)**

Name	Relationship	Telephone
Address		City
Name	Relationship	Telephone
Address		City
Doctor Name		Telephone
Address		City

**CONSENT**

I UNDERSTAND THAT THE SCHOOL DOES NOT ASSUME RESPONSIBILITY FOR PAYMENT OF A PHYSICIAN. HOWEVER, IN AN EMERGENCY YOU MAY CHOOSE A PHYSICIAN.

Parent Signature \_\_\_\_\_

Date Mo./Day/ Year \_\_\_\_\_

**Please complete the following information**

For SHA Athletic Information call: Sacred Heart Academy 619 222-7252