

Annual St. Patrick Catholic School Athletic Commitment, Release and Consent

Student Athlete _____ Grade _____ School Year _____

It is our desire to be permitted to participate in the St. Patrick Catholic School Athletic Program.

We understand that the program will be guided by the St. Patrick Catholic School Athletic Mission Statement and Statement of Policies, which has been provided to us prior to signing this Athletic Commitment, Release, and Medical Consent form. (See St. Patrick Catholic School Parent/Student Handbook.)

As pre-requisites for being considered for participation in this program we have: 1) signed & returned this form, 2) made payment of fees, 3) completed annual athletic history, clearance & physical examination forms, 4) committed ourselves to both the letter and the spirit of the St. Patrick Catholic School Mission Statement and its Statement of Policies.

We specifically make the following commitments to this program:

Student Athlete Commitments:

- I will remain academically eligible and meet any other standards established by the Principal for participation in extra-curricular activities.
- I will make every effort to attend all team practices and events.
- I will make the effort necessary to achieve the level of physical condition.
- I will cooperate with my coach and my teammates and will make the personal sacrifices for the benefit of the team.
- I will exhibit exemplary sportsmanship and an outward demeanor that casts a positive reflection upon myself, my team and St. Patrick Catholic School.
- Return all sports equipment/uniforms after the season in a timely manner.

Parent-Guardian Commitments:

- I will counsel my Student/Athlete in such ways to insure that my Student/Athlete remains eligible to participate in this athletic program.
- I will reinforce my Student/Athlete's commitment to this program.
- I will personally serve as a role model for exemplary sportsmanship to Student/Athlete.
- I will pursue any issues that I have concerning this program in a manner consistent with the objectives of the St. Patrick Athletic Mission statement.
- In the event all sports equipment/uniforms are not returned after the season in a timely manner, I will reimburse St. Patrick the cost associated with replacing the non-returned equipment/uniforms.

Release and Medical Consent:

In consideration of the benefits derived by my Student/Athlete's participation in this athletic program, I, for myself, my heirs and assigns, do hereby consent, approve, covenant and agree to indemnify and hold harmless the Catholic Diocese of Dallas, St. Patrick Church, St. Patrick Catholic School, their agents, servants, representatives, coaches, and managers from and against all actions or causes of action, claims, demands, liabilities, loss, damage or expense, of whatever kind or nature which may be sustained or incurred by virtue of injury or damage to me or my Student/Athlete resulting or growing out of this athletic program, including without limitation any cause of action sounding negligence or any tort. In the event I cannot be reached during medical emergency, I give consent for medical treatment by a healthcare professional to preserve the life and well-being of my Student/Athlete.

Parent/Guardian _____

Printed Name

Parent Signature _____

Date _____

Student/Athlete Signature _____

Date _____