

## \*\*Soccer Registration\*\*Grades 5th - 8th\*\*

\*\*Soccer will meet every Tuesday & Wednesday 3:30 – 5:30: February - March\*\*

Please email Mrs. Aler for exact dates at saler@shswr.org

\*\*Please note this is a SHCS afterschool activity, but can be played in conjunction with Club Soccer\*\*

SHCS provides middle school competitive teams in Basketball and Soccer for boys and girls. League play is made up of local private schools and homeschool associations. Middle School sport participation is a great way to build friendships, develop individual & team skills, enable lifelong lessons of cooperation, sportsmanship, and teamwork all while experiencing, improving, and maintaining a healthy, physical lifestyle.

## Part A: Participant Information (Please Print Clearly)

Participant Name:	Grade
Parent/Guardian Name:	
Email Address:	
Home Phone:C	ell Phone:
Emergency Contact Name:	
Emergency Contact Relationship:	
Emergency Contact Phone Number:	
Part B: Additional Information (Please Pr	rint Clearly)
Does your child have special needs (disabilit	ies, behaviors)? () Yes () No
Does your child suffer from life-threatening a Please list specific allergies:	
Does your child require any medications or e List Medications:	
Person(s) to release child to:	
Person(s) NOT to release child to:	

**{PLEASE TURN OVER TO COMPLETE}** 

## PART C: Club Fee & Pick-Up Policy

• Fee (TBD)

Pick up time from this sport ends sharply at 5:30, please plan accordingly. Failure to pick up your child on time will result in loss of privilege to participate in future activities.

## **PART D: Liability Waiver**

As a parent/guardian who is legally responsible for any personal actions taken by the above name minor ("participant"):

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend Sacred Heart Catholic School, its officers, directors, employees and agents, chaperons, or representative associated with the event, from any claim arising from or in connection with my child attending the event/club/activity or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the school, its officers, directors associated with the event for reasonable attorney's fees and expenses which they may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the school/diocese.

We strive hard to ensure every child shines at Sacred Heart Catholic School! One part of achieving this goal is ensuring every parent commits to bringing their child(ren) to all practices and events and understand that he/she may be asked to leave the team if he/she misses an excessive number of practices or events, demonstrates poor sportsmanship, has behavioral issues or doesn't remain compliant with Academic Achievement requirements. Please keep in mind joining this club is not only rewarding, it's a commitment!

Signature:	D - 4 -
Signafiire:	Date:
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TRUST THE PROCESS... EMBRACE THE GRIND!