

# 2012 7<sup>th</sup> Grade and 8<sup>th</sup> Grade GIRLS BASKETBALL REGISTRATION

***Due January 27, 2012***

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent(s): \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

In case of emergency *first* call: \_\_\_\_\_ Phone: \_\_\_\_\_

Call *second*: \_\_\_\_\_ Phone: \_\_\_\_\_

## Parental/Guardian Release and Agreement

As Parent or Legal Guardian, I authorize a qualified physician to examine the above-named student and, in the event of injury, to administer emergency care and to arrange for any consultation by a specialist, including a surgeon, he/she deems necessary to insure proper care of any injury. Every effort will be made to contact parent or guardian to explain the nature of the problem prior to any involved treatment.

**\*I understand that at times my child will be riding with other adults in private vehicles to games and I authorize my child to do so.**

**Parent/Legal Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Student Agreement

I understand that with the privilege of playing basketball for Northshore Christian Academy, also comes the commitment to being at all practices, unless sick or prior communication with the coach. I also agree to listen, obey, and respect the coaches and officials. I will maintain my academics to the standards expected as set forth in the Middle School Handbook. I will pray for and encourage my teammates and live by example Christ-like behavior displaying good sportsmanship both on and off the court.

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Office Only:

Registration Fee: \$125.00

Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_ Cash Receipt Given: \_\_\_\_\_

Emergency Form: \_\_\_\_\_ Doctor's Physical: \_\_\_\_\_ Notes: \_\_\_\_\_