

Immaculate Conception School Athletic Program
Parents' Agreement

Please sign and return

As a parent of a student participating in the ICS athletic program, I agree to:

1. Read and adhere to the policies in this handbook.
2. Provide a current physical report, permission slip, and insurance form before my child can participate in any game.
3. Pay all registration and participation fees before my child will receive a uniform.
4. Attend the parent meeting each year before my child receives their uniform.
5. Review the grievance procedure and follow the steps outlined.
6. Read the player responsibilities policies, and encourage my child to follow them.
7. Assume replacement costs of damaged or lost uniforms.

SIGNED _____

Interscholastic Athletic Form for ICS

The undersigned, the parent(s) or legal guardian of

(name of student-grade)

(name of student-grade)

(name of student-grade)

(name of student-grade)

give the student(s) listed above permission to participate in the interscholastic athletic program at ICS for the school year_____.

We also attest that the student(s) is insured with

_____.

(name of insurance company)

The undersigned further agree that they will not hold any of the Indemnified Parties liable for any doctor's fees, hospital charges or expenses arising out of or incurred as a result of or in connection with student's involvement or participation in any parish school or parish sponsored athletic program or activity.

In case of emergency, the home phone is _____, the work numbers are _____

(father's work)

(mother's work)

Signed _____ Date _____