

Town East Christian School

Athletics Application

This application is for athletes presently enrolled, who desire to participate in the TECS athletic program for the _____ athletic year. An athletic fee of \$ _____ per athlete must accompany application and is not refundable.

Date	School Year	Sports interested in:	
Student's Name			Phone
Address		City	Zip
Age	Birthdate	Medical Concerns	
Father's Name		Work Phone	Cell Phone
Mother's Name		Work Phone	Cell Phone
Emergency Contact		Address	Phone
Child's Physician		Address	Phone

"I understand that my child is expected to take part in all after-school practices, including sponsored trips away from the educational facility, and I absolve the school from liability to me or my child because of injury to my child at properly supervised athletic events.

"I understand that a physical from a licensed medical physician is required at the beginning of every school year.

"I understand I am responsible for all medical bills.

"I agree to uphold and support all school practices.

"I appreciate the standards of the school and will not tolerate profanity, obscenity in word or action, dishonor to our Lord Jesus Christ or to the Word of God, or disrespect to the school staff. I hereby agree to support regulations published in the Student Handbook.

"I understand I must follow the spirit of the school dress code stated in the Student Handbook.

"I understand that the school reserves the right, after a parental conference, to dismiss any child who fails to comply with established regulations and discipline.

"I hereby give permission for emergency medical treatment by a qualified licensed physician in my absence. I understand that in case of emergency I will be contacted ASAP.

Signature of Parent/Guardian

Date

Signature of Athlete

Date