



INTRAMURAL PERMISSION FORM

_____ School Year

Student's Name: _____ Grade: _____ Sport(s): _____

Student's Name: _____ Grade: _____ Sport(s): _____

Student's Name: _____ Grade: _____ Sport(s): _____

EMERGENCY CONTACT NUMBERS

Name: _____ (_____) _____

Name: _____ (_____) _____

- I am in agreement and will support the terms regarding the Athletic Department and programs at Valley Christian Academy (VCA).
- I understand this form gives my students' permission to participate in athletic program as VCA.
- I understand I am responsible for all information on the Intramurals and/or Middle School Athletics web page.
- I understand sports are competitive and injuries may occur. I acknowledge **I am responsible** for the **Parent/Athlete Concussion Information** located on the Intramural page and will **turn in a copy** along with this Permission Form. I agree not to pursue legal action against VCA, or any of the coaches should my son/daughter become injured as a result of participation.
- I agree to pay the amount designated on the website for each sport. I further agree to pay for any damages made to uniforms and/or equipment.
- I recognize that intramurals runs from 3:15-4:15 p.m. As soon as intramurals is finished, students' will be escorted to the pick-up location "bus lane", where vehicles are permitted to wait. After 4:25 p.m. students will be checked in to Extended Student Supervision (ESS). An authorized individual will be required to check out the students'. *There is an additional charge for ESS.
- I understand the participation in athletic programs is a privilege. I further understand if my son/daughter chooses not to following instruction from the coaches, he/she will not be permitted to continue and the fee will not be refunded.
- I am aware that my son/daughter may be photographed and/or name published in the media. Media includes newspaper, newsletters, programs, brochures, VCA's website or any other type of format by any organization.
- Valley Christian Academy does not discriminate on the basis of race, color, gender, or national origin in the administration of its admissions policy, educational or other school-sponsored programs or financial obligations or aid.

PARENT (GUARDIAN) SIGNATURE: _____ DATE _____