



EASTWOOD BASKETBALL 2016-2017

Covenant Form

Student Email _____

Student Phone _____

Parent Email _____

Parent Phone _____

Physical exam date _____

Medical conditions/medications _____

PARENT VOLUNTEER SIGNUP: KEY AREA INTEREST:

1. _____
2. _____
3. _____

Parent and Athlete Covenant

We have read and understand the rules of the Eastwood Christian School Junior Varsity Basketball Team and the Eastwood Christian School academic policies concerning participation in athletics. We hereby enter a covenant with the coaches and team to abide by the spirit and letter of these rules and to support the coaches in their efforts to lead, manage, and mentor the team

Parent Signature and Printed name

Date _____

Athlete Signature and Printed name

Date _____