

ST. VIATOR ATHLETIC ASSOCIATION ATHLETIC PROGRAMS CONSENT FORM



Student's Name		Grade	Room #	
Parent/Guardian		email		
Home phone		Cell phone		
I hereby agree to the following:				
		ing insurance coverage options: accident Insurance provided through St. Viator Sch	ool	
		uate coverage for any and all injuries. I also agree		
		at any time during the program.	.oo, tire program	
Insurance Company:		Policy Number:		
2. Special Health/Physical co	nditions, if any:			
 I understand that only tho practice times. Siblings are provide supervision and is I, parent/guardian give my harmless the St. Viator Ath I understand that it is necessadmissions during the cou 	se students pare not allowed to not liable for a child permission eletic Association essary for each rse of each pro	ached, and in the judgment of the program Super- upervisor to summon emergency medical attention ticipating in the selected program(s) are allowed to be in the gym during practices. The Athletic Assor my student who is not a participant of the on-going on to participate in the program(s) selected below, on and its members/volunteers from any and all lia family to donate time/service as a volunteer for co- gram for which their child enrolls. The amount of rticipants in the program as well as the number of	o be in the gym during ciation is not able to g program. I hereby release and all honcession and/or time/service that will	_No g holo arm.
Parent/Guardian Signature:		Date:		
=======================================		:==========::: LEASE SELECT PROGRAM(S)	=======================================	
Boys Intramural Basketball		Boys Travel Basketball	\$110.00	
Boys Rock N Jock	\$40.00	Boys Travel Volleyball (7th/8th grade)	\$85.00	
Boys Nock N Joek	\$40.00	Girls Travel Basketball	\$110.00	
Girls Intramural Basketball	\$40.00	Girls Travel Volleyball (5th/6th grade)	\$110.00	
Co-ed Intramural Volleyball	\$40.00	Girls Travel Volleyball (7th/8th grade)	\$85.00	
So ca meramarar voncysum	ų 10100	TOTAL PAYMENT ENCLOSED	400.00	
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PAYMENT AND CONSENT FORMS ARE DUE AT THE BEGINNING OF EACH PROGRAM. PLEASE INCLUDE PAYMENT ALONG WITH THIS FORM. PLEASE COMPLETE ONE FORM PER CHILD, HOWEVER YOU CAN SELECT MULTIPLE PROGRAMS FOR EACH CHILD ON ONE CONSENT FORM.

PLEASE COMPLETE BOTH SIDES OF THIS FORM (PARENT PLEDGE ON REVERSE SIDE)

MAKE CHECKS PAYABLE TO: ST. VIATOR ATHLETIC ASSOCIATION, SEND VIA SCHOOL OFFICE: ATTN. CARMEN MALIZIA

QUESTIONS REGARDING FEES OR PAYMENTS PLEASE CONTACT: CARMEN MALIZIA AT: CARMENTELLO@HOTMAIL.COM Rev 2/2015



St Viator Athletics - Parent Pledge



Please read, initial each item, sign at the end, and return to the Athletic Assn. Elementary along with the consent form.

1.	be uncomfortable for my child to be late to a game or practice and that he/she is subject to physical risk if not provided with adequate time to warm up. I understand that I am allowed to stay during practices and games, but if I do not, I will be there when he/she is finished. Being punctual shows respect for the coach, who has other time commitments, and it tells my child that he/she is my top priority
2.	I understand that the top three reasons kids play sports are to have fun, make new friends and learn new skills. understand that the game is for the kids, and that I will encourage my child to have fun and keep sport in its proper perspective. I understand that athletes do their best when they are emotionally healthy, so I will be positive and supportive
3.	I will redefine what it is to be a "Winner" in my conversations with my child. Winners are people who make the maximum effort, continue to learn and improve, and do not let mistakes, or fear of making mistakes, discourage them. I understand that mistakes are an inevitable part of any game and that people learn from their mistakes. understand that all children are born with different abilities and that the true measure of success is not how my child compares to others, but how he/she is doing in comparison to his/her best self
4.	I will "Honor the Game." I understand the importance of setting a good example of sportsmanship for my child. will show respect for all involved in the game including coaches, players, opponents, opposing fans, and referees. I understand that officials, coaches, and players make mistakes. If the referee makes a call I do not agree with, I will refrain from questioning, insulting or making personal attacks against him or her
5.	I understand that games can be exciting times for my child as he/she deals with the fast-paced action of the game, responds to opponents, referees, teammates and listen to coaches. I will not yell out instructions. During the game, I will make only sportsmanlike comments that encourage my child and other players on both teams.
6.	I will not make negative comments about the game, coaches, referees or teammates in my child's presence. This sets a bad example, which can negatively influence my child's motivation and overall experience. I agree to act in a sportsmanlike manner and make every effort to foster a friendly and non-violent atmosphere
7.	I will not yell at or degrade the volunteer coaches or support staff. I will refrain from discussing issues or disagreements during or directly after a game with the coach. I will follow the Complaint resolution policy outlined below to address my concerns
	Parent/Guardian Signature: Date
	Player Name (Printed): Team

Complaint resolution policy

Issues or concerns that arise should be discussed with the player's head coach. If a complaint is brought to a teacher, administrator or another coach, they will report the issue in writing to the head coach for discussion with the concerned party. If the result of this discussion is not satisfactory to all parties, then the issue should be addressed with the President of the Athletic Association and resolved if needed with the SVAA executive board. If no resolutions can be made the Athletic Association President will ask the Pastor/or Principal for assistance. All complaints will be documented.